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SPECIAL NOTICE TO MEMBERS

Every Member is requested to preserve this "Supplement," which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he or she belongs.

NOTES OF THE WEEK

Public Medical Services

The Oxford Public Medical Service and a number of leading friendly societies in the area have agreed that the capitation fees which are payable by the friendly societies to the Public Medical Service in respect of non-insured members of friendly societies in the Oxford area shall be increased to 12s. for each adult and 9s. 6d. for each juvenile member. These fees, however, are subject to a deduction, not exceeding 5 per cent., for administrative expenses. Arrangements have been made for the collection of subscriptions and for accountancy work, and a Standing Joint Committee of the Public Medical Service and the friendly societies has been established for the purpose of discussing matters of mutual interest. The scheme will be operative for three years, from April 1, 1937, and the friendly societies concerned have undertaken not to enter into any fresh individual contracts with medical practitioners in the Oxford area at capitation rates lower than those provided for in the agreement.

A committee has been appointed by the Reading Division to consider the formation of a Public Medical Service for Berkshire.

Hospital Accommodation in Staffordshire

The revision of areas under the Local Government Act, 1929, has caused difficulties relating to hospital accommodation in certain districts in South Staffordshire. Owing to the termination by the Staffordshire County Council of an arrangement by which patients from Willenhall, Bilston, Wednesfield, and Tettenhall were admitted to New Cross Hospital, patients from these districts will now have to be sent to Sandford Institution, a distance of from eight to twelve miles. It is said that this procedure will not only cause hardship to patients and their friends but will also make it difficult for practitioners to keep in touch with their patients. The South Staffordshire Division is negotiating with the County Council on the subject.

Paying Patients at Eastbourne Hospital

An appeal is to be made for funds for the erection of a paying patients' department of the Princess Alice Hospital, Eastbourne. It is proposed to have sixteen beds, the charge for some of which will be four guineas and for others six guineas per week. For two beds a charge higher than six guineas will be made. These fees will include nursing and drugs, and the chief additional costs will be for surgical treatment and *x*-ray work.

Public Assistance Domiciliary Medical Service in Leeds and Manchester

The Leeds Division was represented on a deputation from the local medical profession which was received recently by the Leeds Health Committee to discuss the reorganization of the domiciliary medical service for public assistance patients. The deputation suggested that public assistance patients should be permitted free choice of doctor from among those practitioners who indicated their willingness to take part in the scheme.

The difficulties which have been encountered by the Manchester City Council in the negotiations for the reorganization of this service on "free choice" lines led to a suggestion that the council should establish a system of municipal surgeries in charge of whole-time medical officers. This proposal was defeated at a recent meeting of the City Council.

Maintenance Charges in South Shields Hospital

The Health Committee of the South Shields Corporation has prepared a scale of charges for the maintenance of patients in the South Shields General Hospital. The charges proposed vary from 1s. to 4s. 8d. a day according to the family income. The income limits are arranged according to the size of the family, and vary, for a family of three, between 37s. a week, when 1s. a day is charged for maintenance, and 63s. when the maximum maintenance fee is charged.

DANGEROUS DRUGS REGULATIONS

Draft Dangerous Drugs Regulations[1] have just been published to amend in certain respects the Dangerous Drugs (Consolidation) Regulations, 1928, and make substantive the provisional rules dated May 1, 1936, which were designed to bring the earlier regulations into conformity with the Pharmacy and Poisons Act, 1933. Some of the new amendments are of interest to medical practitioners. Regulation 9, which relates to the dispensing of prescriptions, has been slightly amended to remove the doubts which have occasionally arisen as to the meaning of the expression "two or three times" in connexion with the repetition of a prescription. The regulation now reads "a second or third time." The documents which must be preserved for two years now include signed orders for dangerous drugs given under Rule 7 of the Poisons Rules, 1935. The form of the register of drugs or preparations supplied has been slightly amended by the deletion of the last column—namely, the ingredients of the prescription—as it has been found in practice to be unnecessary. The list of drugs for which separate registers or separate parts of the register must be kept has been amended by substituting for dihydro-oxycodeinone and dihydrocodeinone the following three groups: dihydrohydroxycodeinone (commonly known as eucodal) and preparations containing dihydrohydroxycodeinone; dihydrocodeinone (commonly known as dicodide), and preparations containing dihydrocodeinone; dihydromorphinone (commonly known as dilaudide), and preparations containing dihydromorphinone.

The general authority granted to certified midwives to be in possession of, and to administer, preparations containing opium so far as is necessary for the practice of their profession has now been incorporated in the Dangerous Drugs Regulations in place of the separate authority granted by the Secretary of State in 1921. Persons engaged in testing schemes under the National Health Insurance Acts are now authorized to be in possession of dangerous drugs, and prescriptions issued for such testing purposes are exempted from the Regulations. Similar provision has been made for sampling under the Food and Drugs (Adulteration) Acts. Under the 1928 Regulations prescriptions under the National Health Insurance Acts were not required to specify the address of the persons giving them. This exemption has now been extended to prescriptions given in connexion with the health services of local authorities.

An important amendment has been made in the list of drugs and preparations exempted from the Regulations. In order to bring English legislation into line with the international conventions with regard to exempted preparations, a declaration by His Majesty in Council is to be made with effect from July 1 next, exempting from the Acts, and consequently from the Regulations, all the preparations which have been exempted from the International Opium Convention, 1925, on the recommendation of the Health Committee of the League of Nations. The present Draft Regulations, however, exempt from the Regulations made under Section 7 of the Act only certain other drugs and preparations. Methylmorphine and ethylmorphine are exempted because they are subject to a separate code of regulations, which remains unaltered, and certain preparations of these drugs are also included. Cocaine eye drops have been inserted in the list, and pulv. cretae aromat. c. opio, *B.P.* 1932, continues to be exempted.

[1] Draft Dangerous Drugs Regulations, 1937. His Majesty's Stationery Office. (5d.)

Draft Raw Opium, etc. (Consolidation) Regulations[2] have also been issued under Section 3 of the Dangerous Drugs Act, 1920, for the purpose of consolidating the seven sets of regulations at present in force for controlling and restricting the possession, sale, and distribution of the drugs to which Part I of that Act as amended by the Dangerous Drugs Act, 1925, applies—namely, raw opium, coca leaves, Indian hemp and resins obtained from Indian hemp, and all preparations, other than extract or tincture of Indian hemp, of which such resins form the base.

THE INSURANCE MEDICAL SERVICE WEEK BY WEEK

Reducing the List of an Overworked Doctor

Among other forms of action which an insurance committee is empowered to take when considering the report of its medical service subcommittee after the investigation of a complaint is that of reducing the doctor's list below the general limit approved for the area. The provision in the regulations is as follows:

"If the committee is satisfied that owing to the number of persons included in his list the practitioner is unable to give adequate treatment to all those persons it may, after consultation with the Panel Committee, impose a special limit on the number of insured persons for whom the practitioner may undertake to provide treatment."

Two or three points of interest may be noted with regard to this provision: (1) that it has appeared in the regulations since the earliest days of medical benefit; (2) it is placed first among the actions which the insurance committee may take; (3) it has rarely been put into operation.

A most interesting discussion arose at the public meeting of the London Insurance Committee last week. The Medical Service Subcommittee had appended to its report on a particular case a recommendation that the doctor be censured and that £20 be withheld from his pay. A member of the committee handed in an amendment proposing that the Insurance Committee should also consider whether a reduction should not be made in the doctor's list. In the discussion which followed it was recognized that it would not be proper then and there for the Insurance Committee to come to a decision on the question whether, and if so what, reduction should be made in the doctor's list. The amendment was therefore properly drafted as one providing for due consideration of the question, including its examination by the appropriate subcommittee. Further, the regulation requires that action should be taken only after consultation with the Panel Committee.

The committee therefore accepted the recommendation of the Medical Service Subcommittee, and proceeded to consideration of a separate notice of motion with regard to the question of the reduction of the doctor's list, which was adopted after discussion. The fact that this question is to be examined will be communicated to the doctor and the Ministry of Health when submitting the report of the Medical Service Subcommittee and the Insurance Committee's decision thereon. This will presumably leave the doctor with the right of appeal, not only against the original recommendation, but also against any decision that may be reached as to the limit of the numbers on his list.

[2] Draft Raw Opium, Etc. (Consolidation) Regulations, 1937. His Majesty's Stationery Office. (2d.)

The particular case on which this discussion arose was of interest not merely because it gave rise to the consideration in applying a somewhat rarely used procedure, but also by reason of the facts of the case and the finding that the practitioner's statements on certain essential points were "not worthy of credence." The following extracts from the report lead up to a finding that the practitioner was guilty of a serious breach of the Terms of Service and to the recommendation which has been set out earlier in this note.

"The practitioner's explanation that he was unable after two fruitless calls at 'X House' to refer to the record card for the true address because the caretaker was not in the habit of recording names, or, as it appeared from the practitioner's answers to us, even in a block of tenements the number of the tenement seems to us, if it is true, to point to a lack of method in carrying on his practice which would be nothing less than appalling. His failure to offer this explanation when he did visit 'Y House' (where incidentally he inquired for the patient by name) is a strong indication that the explanation is not worthy of credence. We say this with much regret, but we should frankly still more regret the condition of things in this practice if the explanation were true.

"We find the following facts to have been established: (1) that on December 31, 1936, there were 2,478 insured persons included in the list of the respondent practitioner; (2) that the deceased insured person was accepted by the respondent on May 12, 1930, and that at the date material to the case the name of the insured person was included in the list of the respondent as that of a person entitled to obtain treatment from him; (3) that on December 30, 1936, the insured person was ill, and that telephonic requests for the practitioner's services were made to the practitioner's surgery at about 12 midnight on December 30, 1 a.m. on December 31, 1936, together with two or three further telephone messages during the morning of the latter day, the first being made at about 8.45 a.m; (4) that all the telephonic messages referred to at (3) were indicative of urgency; (5) that on each occasion the name of the patient, together with his address and an indication of the position of the address were given, and that on at least three occasions the particulars given were repeated by the recipient; (6) that the practitioner did not visit the insured person until about 8.15 p.m. on December 31, 1936, after the services of another practitioner had been obtained; and (7) that the insured person was removed to hospital and died there a few hours later from bronchopneumonia."

In the discussion of the case at the public meeting of the London Insurance Committee already referred to, one or two speakers urged that the most charitable construction to put upon the doctor's action was that he was overworked by reason of the large number of persons on his list in conjunction with the conditions of his practice, and that therefore there was a case for considering whether there should not be a reduction in the number of persons on his list. A decision on this point, as already noted, can only be reached after consultation with the Panel Committee.

Medical Insurance Practice

The Local Medical and Panel Committee for the County of London passed the following resolution at its meeting on March 23:

"That the committee do express to the Insurance Committee its appreciation of the action taken in supplying copies of *Medical Insurance Practice* to all principal practitioners on the London Medical List, which, while conducing to increase the efficiency of the national health insurance service, will also enhance the good relations existing between all those concerned in its administration within the area."

It is understood that in certain other insurance committee areas the decision has been reached to supply all insurance practitioners with a copy of the book.

Treatment in Respect of Dental Haemorrhage

It may be recalled that a case was fully reported in this column some time ago (January 2, p. 8) under the heading "A Decision which Decides Nothing." The subsequent history of the case is contained in the following report presented to the Insurance Committee:

"On January 12, 1937, we had under consideration a report with regard to the appeal to the Minister of Health against the decision of the committee that the service rendered by a practitioner—namely, that the arrest of haemorrhage from the gums following the extraction of teeth to the insured person concerned—was one falling within the definition of the proper and necessary medical services which the practitioner is required by his Terms of Service to render. The committee will remember that the decision of the Minister regarding the appeal, which was determined summarily, was the question whether the service rendered by the practitioner was within the scope of the practitioner's obligations under the Terms of Service was a matter to be dealt with, in the first instance, by the local medical committee in accordance with the provisions of Article 43 of the Medical Benefit Consolidated Regulations, 1928 (now Regulation 46 of the Medical Benefit Regulations, 1936), and that in the circumstances the findings and recommendation of the Medical Service Subcommittee in Case M. 36/17 and the decision of the Insurance Committee based on them were invalid.

"We decided that the question as to the service rendered by the practitioner in connexion with Case M. 36/17 should be referred to the Local Medical and Panel Committee under Regulation 46 of the Medical Benefit Regulations, 1936, for their formal opinion thereon. We have received a letter from the Local Medical and Panel Committee conveying the opinion of that committee that the service rendered by the insurance practitioner in this case was within the scope of the practitioner's obligations under the Terms of Service.

"The matter will now have to be referred to the Minister of Health in accordance with the provisions of Regulation 46, and it will then be for the Minister, if he so desires, to refer the question in accordance with Regulation 46 (4) for decision to referees in the manner provided in the regulation."

It will be of interest to see whether the Minister sends this case to referees. It is true that it was long ago decided by referees that the treatment was medical treatment and clearly within the scope of the practitioner's obligations, but the practitioner has been contending very persistently that conditions have changed, and that therefore the matter should be reconsidered. His argument, indeed, in the report of the case when it was investigated (quite improperly, as it afterwards appeared) by the Medical Service Subcommittee was directed not to the question that the service was outside the scope of his Terms of Service, but that it ought to be, and the proper quarter for the presentation of that argument, at any rate in the first instance, is the Conference of Panel Committees.

Approved Societies and Hospital Treatment

The Central Bureau of Hospital Information has issued a memorandum, No. 108, from the offices of the bureau, 12, Grosvenor Crescent, S.W.1 (4d. post free), giving the names and addresses of (*a*) societies which have included hospital benefit in their fourth valuation schemes, and (*b*) societies which have allocated an annual sum for the purpose of making donations to charitable institutions. With regard to the first list, it is explained in the memorandum that the question of the continuance of the benefit is reconsidered by each society on each valuation, and schemes which include the benefit may be varied from time to time by the societies with the consent of the Minister of Health. In the case of societies with branches, the branches do not necessarily provide the same benefits as the main body. Information regarding any individual

branch can be obtained from the head office of the society. Payment will be made by the societies only in respect of those members who were in the society during the time that the surplus out of which hospital benefit is payable accrued.

Abandonment of Practice

The following is the report of a case in which an assurance organization which was involved financially in the practice communicated with the insurance committee after the doctor had already abandoned his practice. It will be observed that owing to the rapidity with which the clerk to the insurance committee moved in the interests of the insured persons concerned the insurance company was too late to secure that its interests were conserved, even assuming that it would have been possible for the committee to do anything in this direction.

"We have been informed that on February 26, 1937, a telephone message was received that a practitioner had been compelled to leave his house on February 25, 1937, for financial reasons, that his furniture had been stored, and that the practitioner, who was attending that day for an examination in the Bankruptcy Court, was leaving England. In reply to an inquiry as to what arrangements had been made for the treatment of the insured persons concerned, it appears that while negotiations had been proceeding for about a week regarding the sale of the practice, nothing had materialized, and that the practitioner had been forced to take the step reported above. The person who spoke was informed that unless something was done immediately it would be necessary, as a matter of urgency, to issue that day a notice to the insured persons concerned informing them that they might select another practitioner. Later in the day the practitioner attended in person at the office and submitted his withdrawal from the medical list with effect from February 26. In the meantime the notices to the insured persons had been prepared, and the fact that the premises of the practitioner were unoccupied had been verified by an officer of the committee. The notices were dispatched on February 26.

On February 27 a telephone message was received from an assurance organization stating that it was somewhat heavily involved financially in the practice, which it had disposed of to another practitioner, and that it proposed to submit to the committee the former practitioner's withdrawal from the medical list and his nomination, which had been completed by the company, of another practitioner. In view of the action taken on the preceding day the company was informed that it was too late for the committee to consider any further proposition."

Correspondence

IMPLEMENTING THE POLICY OF THE ASSOCIATION AT THE PERIPHERY

SIR,—There is no doubt in my mind that the implementing of policy and even the dissemination of the knowledge of that policy in the Divisions is in a sad state of neglect.

There can be but two reasons for this—namely, apathy of members and inefficiency of Division secretaries. How to eliminate apathy has always been one of the great concerns of all Division secretaries. By inefficiency of secretaries I do not mean that they are willingly inefficient. Honorary secretaries are doing magnificent work, and deserve the thanks of all the members of their Divisions, but frequently the secretary is a doctor with a growing practice who cannot afford, and has no desire, to neglect it. It is not the doctor with plenty of spare time who is elected an honorary secretary of a Division.

Being secretary of a big Division means that most of one's spare time must be given to Association work. This means that during a period such as the one through which we have just passed there is not time to carry out secretarial duties properly. The secretariat at Head Office is always more than willing to help, but this solves very little of the honorary secretary's difficulties. The failure to obtain the full quota of medical votes in the recent University election was due entirely to bad peripheral organization.

The remedy lies in the appointment of regional secretaries who must be *adequately* remunerated. Such a person should not have the ties of general practice to hinder him. It might be possible to include in his duties the routine work of secretary to the Public Medical Service in his region, such as the co-ordination of remuneration, rates of subscription, and terms of service. He would be able to represent the Association on local committees where the times of those committee meetings make it impossible for the average general practitioner to attend without employing a locumtenent. This would cost a good deal of money, but it would be well spent; and here I think that the Association (including the Treasurer) must re-adjust its ideas as to spending money for which it cannot for several years see any tangible return.

It will be impossible to assess for many years to come the work of the recently appointed organizer in the London area, and if we have to await the results before the provinces can be served in a similar manner we are losing very valuable time. Paid help with the secretarial work is not sufficient: this merely helps the honorary secretary to keep abreast of work and does not enable him to go forward and keep ahead of possible developments. Recruiting would be increased enormously with a regional secretary, and so help to save some of the cost.

There is but one danger, and that is that this scheme might lead to a decrease in the amount and character of the voluntary work done for the Association. The possibility of such a thing happening is remote. The more probable result would be an increased voluntary activity, since the honorary secretary would have more time for his part of the work. It is important that the voluntary work should not diminish, since this is the most potent force in Association activity.—I am, etc.,

Birmingham, April 21. ARTHUR BEAUCHAMP.

JAUNDICE IN LEICESTERSHIRE

SIR,—I note in the *Supplement* of April 24 (p. 230), under Public Health Notes, that the type of jaundice in an epidemic mentioned in Dr. J. A. Fairer's annual report to the Leicestershire County Council Education Committee is referred to as "infective hepatic jaundice."

This designation is incorrect, and in the short account given in Dr. Fairer's report it is definitely stated that the disease was of the epidemic catarrhal type. Actually this account embodied a few salient features of an investigation undertaken by me, a report of which was published in the *British Medical Journal* of April 3 (p. 703). I was careful in this article to point out the differences in the various types of jaundice, and to give the reasons why I concluded that the recent outbreak in Leicestershire was one of epidemic catarrhal jaundice.—I am, etc.,

Leicester, April 26. ARTHUR A. LISNEY, Senior Assistant School Medical Officer.

Dr. Barclay Barrowman of Klang, Selangor, Federated Malay States, was recently the recipient of the Malay title "Dato Semboh di Raja," which means "The Healer," in recognition of his services to the Royal Family of Selangor. Dr. Barrowman, who graduated M.B., Ch.B.Glasgow in 1922 and D.T.M. and D.T.H.Liverpool in 1927, in addition to private practice in Klang, acts in an advisory capacity to the Government of the Federated Malay States on malaria control, and annually conducts international teaching courses on this subject under the auspices of the League of Nations. Since 1930 Dr. Barrowman has been physician to the Raja Muda of Selangor and the Royal Family.

Dr. Lachlan Grant of Ballachulish, chairman of the Highland Development League, has published in pamphlet form his address to the senior scholars of Kinlochleven Public School, entitled "Good Education and Well Spent Holidays." He has also contributed to the *Northern Times* of April 8 a thoughtful article on "Development and Reconstruction," discussing various problems of to-day, with special reference to the Highlands and Islands of Scotland.

POST-GRADUATE COURSES AND LECTURES

MAY AND JUNE

The following post-graduate courses and lectures, to be held in London during May and June, have been notified to the British Medical Association. Further particulars may be obtained direct from the hospitals concerned or, in the case of arrangements made by the Fellowship of Medicine (F.M.) from the secretary of the Fellowship, 1, Wimpole Street, W.1.

Subject	Date	Place of Meeting	Nature of Instruction
Arthritis	May 3, 10 ..	British Post-Graduate Medical School, Ducane Road, W.12	Last two lectures of course of six
Breast Diseases ..	May 14, 21, 28, June 4, 11, 18	" "	Course of six lectures
Chest Diseases ..	May 8 and 9 ..	Brompton Hospital, Fulham Road, S.W.3	F.M. week-end course
Dermatology ..	May 3-June 4	St. John's Hospital for Diseases of the Skin, 5, Lisle Street, Leicester Square, W.C.2	F.M. course of fifteen lectures
Experimental Cancer Research	May 5, 10 ..	British Post-Graduate Medical School	Last two lectures of course of six
Experimental Epidemiology	June 2, 9, 16 ..	" "	Course of three lectures
Gynaecology, Present-Day (cont.)	May 6, 13 ..	" "	Last two lectures of course of thirteen
Occupational Diseases	May 25, June 1, 8, 15, 22, 29	" "	Course of six lectures
Psychological Medicine (cont.)	May 1-28 ..	The Maudsley Hospital, Denmark Hill, S.E. 5	F.M. course
Psycho-physical Adaptation (cont.)	May 6, 13, 20, 27, June 3, 10, 17, 24 (two lectures daily)	The Tavistock Clinic, Malet Place, W.C.1	Sixteen lectures of course of twenty

In addition to the above courses the following for the higher qualifications are still in progress.

F.M. course in Anatomy and Physiology (cont.)	May 1-24 ..	Infants Hospital, Vincent Square, S.W. 1	F.R.C.S. (Primary)
L.C.C. Course XX, Part II, Psychological Medicine (cont.)	May 1-27 ..	The Maudsley Hospital, Denmark Hill, S.E.5	D.P.M.

WEEKLY POST-GRADUATE DIARY

BRITISH POST-GRADUATE MEDICAL SCHOOL, Ducane Road, W.—*Daily*, 10 a.m. to 4 p.m., Medical Clinics, Surgical Clinics and Operations, Obstetrical and Gynaecological Clinics and Operations, Refresher Course for General Practitioners. *Mon.*, 2.30 p.m., Dr. C. W. Buckley, Arthritis. *Wed.*, 12 noon, Clinical and Pathological Conference (Medical); 2 p.m., Dr. King, Acid-base Metabolism; 3 p.m., Clinical and Pathological Conference (Surgical); 4 p.m., Mr. J. E. H. Roberts, Surgery of the Chest; 4.30 p.m., Dr. W. E. Gye, Experimental Cancer Research. *Thurs.*, 2.15 p.m., Dr. Duncan White, Radiological Demonstration; 3.30 p.m., Mr. A. K. Henry, Demonstrations on the Cadaver of Surgical Exposures; 3.30 p.m., Mr. Aleck Bourne, Salpingitis. *Fri.*, 2 p.m., Operative Obstetrics; 3 p.m., Clinical and Pathological Conference (Obstetrics and Gynaecology).

FELLOWSHIP OF MEDICINE AND POST-GRADUATE MEDICAL ASSOCIATION, 1, Wimpole Street, W.—*Maudsley Hospital*, Denmark Hill, S.E.: Afternoon Course in Psychological Medicine. *St. John's Hospital*, 5, Lisle Street, W.C.: Afternoon Course in Dermatology. *Brompton Hospital*, S.W.: Sat. and Sun., Course in Chest Diseases.

CENTRAL LONDON THROAT, NOSE AND EAR HOSPITAL, Gray's Inn Road, W.C.—*Daily*, Clinical course.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—*Thurs.*, 2 p.m., Clinical Lecture, Dr. Wilfred Pearson, Nephritis; 3 p.m., Clinico-pathological Lecture, Mr. Denis Browne, Treatment of Empyema. Out-patient Clinics, mornings, 10 a.m. to 12 noon. Ward Visits, afternoon, 2 p.m. to 3.30 p.m.

INSTITUTE OF PATHOLOGY AND RESEARCH, St. Mary's Hospital, W.—*Tues.*, 5 p.m., Dr. F. M. R. Walshe, Some General Principles in Neurological Diagnosis.

LONDON SCHOOL OF DERMATOLOGY, 5, Lisle Street, W.—At 5 p.m., *Mon.*, Dr. M. Sydney Thomson, Animal Diseases Communicable to Man; *Tues.*, Dr. H. Corsi, Diseases of the Nails; *Thurs.*, Dr. J. M. H. Macleod, Ringworm Infections; *Fri.*, Dr. W. K. Sibley, Alopecia.

TAVISTOCK CLINIC, Malet Place, W.C.—*Mon.*, 5.45 p.m., Dr. H. Crichton-Miller, Sex—Personal and Social Factors. *Thurs.*, 3 p.m. Dr. Crichton-Miller, Insomnia; 4.30 p.m., Dr. Cedric Shaw, The Allergic Diseases—Case Histories; 5.45 p.m., Dr. Crichton-Miller, Society—Family and Social Relationships—Work.

UNIVERSITY COLLEGE, Gower Street, W.C.—*Mon.*, *Tues.* and *Thurs.*, 5 p.m., Prof. Dr. H. Rein (Göttingen), Some Economizing Mechanisms as a Condition of the Body's Adaptation to Increased Activity.

WEST LONDON HOSPITAL POST-GRADUATE COLLEGE, Hammersmith, W.—*Daily*, 2 p.m., Operations, Medical and Surgical Clinics. *Mon.*, 10 a.m., Dr. Post, *X*-Ray Film Demonstration, Skin Clinic; 11 a.m., Surgical Wards; 2 p.m., Surgical and Gynaecological Wards, Eye and Gynaecological Clinics; 4.15 p.m., Dr. Archer, Biochemical Demonstration. *Tues.*, 10 a.m., Medical Wards; 11 a.m., Surgical Wards; 2 p.m., Throat Clinic. *Wed.*, 10 a.m., Children's Ward and Clinic; 11 a.m., Medical Wards; 2 p.m., Eye Clinic, Gynaecological Operations. *Thurs.*, 10 a.m., Neurological and Gynaecological Clinics; 12 noon, Fracture Clinic; 2 p.m., Eye and Genito-Urinary Clinics. *Fri.*, 10 a.m., Medical Wards, Skin Clinic; 12 noon, Lecture on Treatment; 2 p.m., Throat Clinic; 4.15 p.m., Dr. Archer, Biochemical Demonstration. *Sat.*, 10 a.m., Children's and Surgical Clinics; 11 a.m., Medical Wards. The lectures at 4.15 p.m. are open to all medical practitioners without fee.

ABERDEEN MEDICAL SCHOOL.—At Aberdeen Royal Infirmary, *Tues.* and *Thurs.*, 3.15 p.m., Dr. John Innes, Medical Emergencies in General Practice.

BIRMINGHAM UNIVERSITY.—At Medical Faculty Buildings, Edmund Street: *Thurs.*, 4 p.m., William Withering Lecture by Prof. J. C. Drummond, The D Vitamins and other Members of the Fat-soluble Group.

GLASGOW POST-GRADUATE MEDICAL ASSOCIATION.—At Royal Hospital for Sick Children, *Wed.*, 4.15 p.m., Dr. Stanley Graham, Deficiency Diseases in Childhood.

GLASGOW UNIVERSITY.—At Tennent Memorial Building, Church Street: *Tues.*, 5 p.m., Dr. I. Chesar Michaelson, Headache and Asthenopia.

MANCHESTER ROYAL INFIRMARY.—*Tues.*, 4.15 p.m., Dr. A. Hillyard Holmes, Haematemesis. *Fri.*, 4.15 p.m., Dr. William Brockbank, Demonstration of Medical Cases.

DIARY OF SOCIETIES AND LECTURES

ROYAL SOCIETY OF MEDICINE

Section of Orthopaedics.—Tues., 5.30 p.m. (Cases at 4.30 p.m.) Annual General Meeting. Election of Officers and Council for 1937–8. Cases by Mr. L. H. F. Walton: Congenital Deformity of the Hip; Lumbar Scoliosis—Case for Diagnosis. Other cases will be shown.

Section of Surgery.—Wed., 5.30 p.m. Annual General Meeting. Election of Officers and Council for 1937–8.

Section of History of Medicine.—Thurs., 5 p.m. Annual General Meeting. Election of Officers and Council for 1937–8. Paper by Prof. Bernard Ashmole: The Monster in Greek Art.

Section of Otology.—Fri., 10.30 a.m. (Cases at 9.30 a.m.) Annual General Meeting. Election of Officers and Council for 1937–8. Discussion: Otitis Media in Early Childhood (under 5 years). Openers, Dr. Le Mée (Paris), Dr. Ritchie Rodger, Mr. Stirk Adams, Dr. H. J. Ebbs, Mr. C. E. Scott, and Mr. R. B. Lumsden. Cases will be shown.

Section of Laryngology.—Fri., 5 p.m. (Cases at 4.30 p.m.) Annual General Meeting. Election of Officers and Council for 1937–8. Paper by Mr. Hugh Cairns: Injuries of the Frontal and Ethmoidal Sinuses producing Cerebro-spinal Rhinorrhoea. Short Paper and Demonstration of Anatomical Specimens by Mr. V. E. Negus. Cases will be shown. 4 p.m., Films. Dr. Le Mée: Fulminating Laryngo-tracheo-bronchitis; Ten Minutes in the Bronchoscopic Clinic at Philadelphia.

PADDINGTON MEDICAL SOCIETY.—At Paddington Town Hall, Paddington Green, W., *Tues.*, 9 p.m. Dr. G. F. McCleary: The Threatened Depopulation of the British Commonwealth.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY.—At West London Hospital, Hammersmith Road, W., *Fri.*, 8 p.m., Clinical and pathological meeting.

Naval, Military, and Air Force Appointments

ROYAL NAVAL MEDICAL SERVICE

Surgeon Captains C. F. O. Sankey, O.B.E., to the *Victory*, for Royal Naval Hospital, Haslar; W. H. Edgar, O.B.E., to the *Victory*, for Royal Naval Barracks ; E. Moxon-Browne to the *Queen Elizabeth*.

Surgeon Lieutenant Commander F. Dolan to the *Colombo*.

Surgeon Lieutenants M. G. Ross to the *Pembroke*, for Royal Naval Barracks ; J. G. Vincent Smith to the *Victory*, for Royal Naval Barracks ; G. H. C. R. Critien to the *Broke* ; W. Boyd to the *Cairo*.

ROYAL NAVAL VOLUNTEER RESERVE

Surgeon Lieutenant Commander H. M. Willoughby to the *Southampton*.

Surgeon Lieutenant M. P. Reddington to the *Pembroke*, for Royal Naval Hospital, Chatham.

ARMY MEDICAL SERVICES

Col. C. M. Drew, D.S.O., late R.A.M.C., having attained the age for retirement, has been placed on retired pay.

Lieut.-Col. and Brevet Col. J. A. Manifold, D.S.O., from R.A.M.C., to be Colonel, with seniority January 1, 1936.

ROYAL ARMY MEDICAL CORPS

Majors F. S. Gillespie and R. R. G. Atkins, M.C., to be Lieutenant-Colonels.

Major R. J. Rosie has been restored to the establishment.

The following Lieutenants to be Captains, witlh seniorities from the dates indicated in parentheses: R. J. G. Morrison, J. W. Orr, and N. C. Lendon (April 23, 1936); C. E. Watson, J. A. G. Carmichael, and W. G. Bateson (October 23, 1936); A. T. Marrable (October 27, 1936); H. R. Simon (October 30, 1936); A. C. Byles (January 11, 1937); J. A. Hamilton (January 29, 1937).

Lieutenants J. Shields, C. W. Maisey, W. T. M. Moar, K. H. Harper, T. M. W. D'Arcy, M. F. Kelleher, E. J. Crowe, and C. McGrath to be Captains.

The appointments of the following Lieutenants have been antedated to the dates indicated in parentheses, under the provisions of Article 36, Royal Warrant for Pay and Promotion, 1931, but not to carry pay and allowances prior to April 23, 1936: R. J. G. Morrison, J. W. Orr, and N. C. Lendon (April 23, 1935); C. E. Watson, J. A. G. Carmichael, and W. G. Bateson (October 23, 1935); A. T. Marrable (October 27, 1935); H. R. Simon (October 30, 1935); A. C. Byles (January 11, 1936); J. A. Hamilton (January 29, 1936).

Lieutenants (on probation) R. J. Niven and S. H. Gibbs have been restored to the establishment.

ROYAL AIR FORCE MEDICAL SERVICE

Wing Commander R. S. Overton to R.A.F. Depot, Uxbridge, for duty as Medical Officer.

Flight Lieutenants R. E. Alderson to R.A.F. General Hospital, Palestine and Transjordan, Sarafand; R. A. Cumming to No. 203 (Flying Boat) Squadron, Basrah, Iraq; J. R. Cellars to R.A.F. Station, Amman, Palestine.

Flying Officers D. F. Cameron to Home Aircraft Depot, Henlow; W. T. Buckle to No. 5 Flying Training School, Sealand; J. D. Milne to No. 9 Flying Training School, Thornaby; J. C. Taylor to No. 10 Flying Training School, Tern Hill; H. O'B. Howat to No. 11 Flying Training School, Wittering; J. H. Lewis to No. 2 Flying Training School, Digby; S. Paul to No. 7 Flying Training School, Peterborough; E. S. Sidey to No. 1 Flying Training School, Leuchars.

Flying Officer A. R. Sibbald has been transferred to the Reserve, Class D.

Flying Officer J. Conroy has resigned his short service commission.

TERRITORIAL ARMY

ROYAL ARMY MEDICAL CORPS

Captain D. S. Middleton to be Major.

Captain J. J. McEnery has resigned his commission.

Lieutenants R. J. Kellar and W. G. Love to be Captains.

INDIAN MEDICAL SERVICE

Captain E. A. O'Connor, an Officiating Agency Surgeon, has been posted as Medical Officer, Meshed, as from February 20.

Captain K. Cunningham has been permitted to resign his appointment as from January 17.

The services of Captain L. Dass have been placed temporarily at the disposal of the Government of Madras for employment in the Jail Department.

On reversion from foreign service under the Indian Research Fund Association, Captain M. L. Ahuja, an officer of the Medical Research Department, has been appointed to officiate as Assistant Director, Central Research Institute, Kasauli

ANNUAL MEETING, BELFAST

HOTEL ACCOMMODATION

All the single rooms in the larger hotels have already been booked, but there are still a few to be had in the smaller hotels. Application for these should be made direct to Messrs. Thos. Cook and Son, 27, Royal Avenue, Belfast, but applications for private hospitality, lodgings, or students' hostels should be addressed to the Secretary, B.M.A., Whitla Medical Institute, College Square North, Belfast.

ANNUAL DINNER, JULY 22.

Reservations of tables for the Annual Dinner, which is being held in the King's Hall, Balmoral, and is this year taking the form of a dinner-dance, are being made daily and early application is advisable. The numbers of the tables already booked are 9, 21, 22, 26, 28, 30, 33, 38, 41, 44, 47, 48, 49, 50, 51, 52, 56, 57, 60, 63, 66, 69, 72, 75, 83, 86, 87, 89, 90, 93, 95, 98. All applications must be accompanied by the correct subscriptions, and an alternative choice of tables should be given (see *Supplement*, April 10, p. 179).

GARAGE ACCOMMODATION

The following is a list of garages in and around Belfast which has been compiled by the A.A. and the R.A.C.:

Stanley Harvey and Co., 20, Adelaide Street.
W. J. McCrum, 7, Antrim Road.
J. E. Coulter, Ltd., 40, Antrim Road.
O. D. Cars, Ltd., Antrim Road.
A. Stringer, 156, Antrim Road.
Cowan and Spence, Bedford Street.
Jacks and Co., 62, Bedford Street.
Victor H. Robb, Ltd., Chichester Street.
J. B. Ferguson, Ltd., Chichester Street.
Isaac Agnew, Ltd., 63, Chichester Street.
John Hanna, 34, Chichester Street.
Morrow and Wedgewood, 28, Claremont Street.
W. J. Chambers, 104–108, Donegall Pass.
W. H. Connolly, Ltd., 118, Donegall Pass.
Harry Ferguson, Ltd., Donegall Square.
W. H. Alexander, Donegall Street.
Leslie Porter, Ltd., 24–28, Great Victoria Street.
Ulster Motor Works, 62, Great Victoria Street.
Stanley Motor Works, 19a, Great Victoria Street.
Victor Ltd., Howard Street.
R. E. Hamilton and Co., Linenhall Street.
E. L. Smyth, 166, Lisburn Road.
Great Northern Motor Works, 348, Lisburn Road.
W. H. Alexander, May Street.
Charles Hurst Ltd., Montgomery Street.
Clarence Engineering Co., Ltd., Ormeau Avenue.
W. H. Reay and Co., Ormeau Road.
Hutchinson, Haddow and Co., Ltd., Oxford Street.
Agnew and Graham, Ltd., Oxford Street.
J. W. Shaw, Ltd., Upper Queen Street.
Belfast Car Laundry, Victoria Road.

BANGOR:

R. J. Hooke, 110–122 Main Street. (Telephone 622.)
S. C. Taylor, 2a, Ballyholme Road. (Telephone 307.)

DONAGHADEE:

W. E. Macklin, Warren Road.

The Malayan Medical Service list for 1937 has just been issued. The Service at present includes 133 medical members, of whom ninety-seven hold appointments on the time scale, nine are specialist officers, twelve are superscale medical and health officers, and four hold supergrade posts. There are seven members at the College of Medicine, Singapore, and four at the Institute for Medical Research, Federated Malay States.

Matters Referred to Divisions

BRITISH MEDICAL ASSOCIATION

ANNUAL REPORT OF COUNCIL, 1936-7 (*Continued*)

APPENDIX V

FINANCIAL STATEMENT

FOR THE TWELVE MONTHS ENDING

DECEMBER 31, 1936

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LONDON:
BRITISH MEDICAL ASSOCIATION HOUSE
TAVISTOCK SQUARE, W.C.1

BALANCE SHEET

LIABILITIES

1935 £		1936 £ s. d.	£ s. d.
	Creditors for—		
1,046	Subscriptions, paid in advance	1,187 18 9	
987	Advertisements ditto	1,835 13 7	
707	Publishing ditto	692 16 9	
356	Contributions	379 2 0	
71	Capitation Grants	434 11 0	
38	Engraving	26 5 2	
76	Journal Index	75 1 0	
76	Legal Charges	136 4 9	
212	Library Books, etc.	217 11 6	
105	Library Postcards	113 19 6	
1,320	Miscellaneous Printing and Paper	687 4 7	
3,289	Machining Journal	3,322 18 2	
2,187	Paper for Journal	3,100 7 11	
2,619	Postage of Journal	2,648 3 3	
49	Plant and Type	107 14 1	
711	Rates, Taxes, Electricity, Gas, and Oil Fuel	903 9 5	
438	Repairs and Decorations	2,149 7 3	
157	Reporting for Journal	166 16 0	
285	Stationery	316 5 2	
60	Sundries	83 15 5	
342	" Archives of Disease in Childhood "	54 6 0	
18	" Journal of Neurology and Psychopathology "	26 4 9	
			18,665 16 0
506	Metropolitan Counties Branch		552 13 9
	Estate of late Assistant Medical Secretary (Proceeds of deferred Annuity Bond)		4,025 5 0
	Reserve to meet Dilapidations and Re-decorations—		
	Balance at December 31, 1935	6,838 12 9	
	Less cost of re-decorations, etc., during 1936	1,942 16 2	
		4,895 16 7	
	Add Transfer from Income and Expenditure Account	2,000 0 0	
6,839			6,895 16 7
	Reserve against Commitments for Extension of Premises—		
	Transferred from Reserve for Printing Plant	11,716 5 0	
	Add Transfer from Income and Expenditure a/c	15,000 0 0	
11,716			26,716 5 0
	Sinking Fund—		
	For redemption of Leasehold Premises—		
	Balance at December 31, 1935	13,553 5 10	
	Add Transfer from Income and Expenditure Account	2,433 6 8	
13,553			15,986 12 6
	Reserve to meet loss on transfer of Colonial Subscriptions—		
	Balance at December 31, 1935	3,268 0 6	
	Less cost of transferring colonial subscriptions during 1936	1,344 6 6	
		1,923 14 0	
	Add Transfer from Income and Expenditure Account	1,000 0 0	
3,268			2,923 14 0
4,625	**Overdraft at Bank**		4,443 11 6
	Surplus Account—		
	General Balance at December 31, 1935	277,474 16 6	
	Excess of Income over Expenditure for twelve months ended December 31, 1936	1,612 2 8	
			279,086 19 2
			£359,296 13 6

Note.—The accounts of the Scholastic, Clerical, and Medical Association are separately kept and audited. The dividends received have been brought into account under Interest on Investments, Deposits, etc.; the remainder of the profits of that Company have been carried forward in its own accounts.

December 31, 1936

ASSETS

1935 £		£ s. d.	1936 £ s. d.
	Leasehold Premises (at cost less amounts written off)—		
	Tavistock Square and Upper Woburn Place—		
	Balance at December 31, 1935	265,239 13 5	
	Add cost of Alterations Tavistock House South	2,878 3 8	
		268,117 17 1	
	Less amount written off for Depreciation	3,000 0 0	
265,240			265,117 17 1
	Premises held by Feu Charter (at cost less amounts written off)—		
	Nos. 6 & 7, Drumsheugh Gardens, Edinburgh, and Contents—		
	Balance at December 31, 1935	6,020 0 0	
6,020	**Less** amount written off for Depreciation	300 0 0	
			5,720 0 0
	Investment in Subsidiary Company (at cost)—		
	598 Shares of £10 each, fully paid, in the Scholastic, Clerical, and Medical		
6,083	Association, Ltd.		6,083 10 0
	Investments (at cost or under)—		
	£3,200 Bank of England Stock @ 200	6,400 0 0	
	£4,000 London, Midland, and Scottish Railway 4% Guaranteed Stock at 80	3,200 0 0	
	(Market value at date £16,196)		9,600 0 0
	Investments representing Reserve against Commitments for Extension of Premises—		
	£8,318 11s. 9d. Local Loans 3% Stock (at cost)	7,985 16 11	
	£15,000 Commonwealth of Australia 2¾% Stock 1941/43 (at cost)	14,845 6 3	
	£4,174 16s. 4d. London County Consolidation 2¾% Stock 1960/70 (at cost)	4,000 0 0	
	(Market value at date £27,004)		26,831 3 2
	Sinking Fund Insurance Policies—		
	Balance at December 31, 1935	13,553 5 10	
	Add Premiums paid during year—		
	Friends Provident and Century Life Office	1,141 13 4	
	Guardian Assurance Company	645 16 8	
	Scottish Widows Fund	645 16 8	
13,553			15,986 12 6
	Library—		
	Balance at December 31, 1935	2,306 1 4	
	Add Purchase and Binding of Books during 1936	435 2 3	
		2,741 3 7	
	Less Sale of Books	2 14 0	
		2,738 9 7	
	Less amount written off for Depreciation	500 0 0	
2,306			2,238 9 7
	Furniture and Office Equipment (at cost less amounts written off)—		
	Balance at December 31, 1935	5,096 16 7	
	Add Purchases during year	1,182 3 10	
		6,279 0 5	
	Less Sales, etc.	2 10 0	
		6,276 10 5	
	Less Amount written off for Depreciation at 15%	941 9 6	
5,097			5,335 0 11
	Plant and Type (at cost less amounts written off)—		
	Balance at December 31, 1935	5,089 17 0	
	Add Purchases during year	483 16 10	
		5,573 13 10	
	Less Amount written off for Depreciation at 15%	836 1 1	
5,090			4,737 12 9
122	**Paper Stock**		415 12 4
3,937	**Subscriptions in arrear**		4,632 19 10
	Sundry Debtors—		
	For Advertisements	7,542 4 9	
	Less Reserve for Bad Debts and Discounts	2,500 0 0	
5,478			5,042 4 9
808	Publishing		731 8 6
1,480	Rents, etc.		2,598 1 0
	Deposit Account—Deferred Annuity Bond (see Contra)		4,025 5 0
	Cash in Hand—		
	Head Office	4 2 2	
	Scottish Office	196 13 11	
360			200 16 1
			£359,296 13 6

Income and Expenditure Account

		1935 £	s.	d.	1936 £	s.	d.	£	s.	d.
Journal Account Expenses	Abstract A	71,715	3	5				75,637	3	2
Central Meeting Expenses	" B	7,479	2	0				6,399	1	9
Library Account Expenses	" C	1,573	19	10				1,672	13	9
General Association Expenses	" D	9,172	12	2				7,521	2	2
Central Premises Account	" E	11,142	13	8				11,840	15	4
Central Staff Expenses	" F	18,892	15	11				19,431	6	5
Central Printing, Stationery, and Postage Expenses	" G	2,980	1	4				2,943	17	2
Scottish Committee Expenses	" J	2,078	0	3				2,301	11	10
Irish Committee Expenses	" K	1,083	19	7				1	17	9
Capitation Grants to Branches		6,915	1	6				7,600	6	9
Subscriptions Written off for Deaths		181	17	3				165	12	9
" " Arrears, etc.		3,937	4	1				3,636	7	8
Bad Debts and Allowances written off		62	19	5				—		
		£137,215	10	5				£139,151	16	6
"Archives of Disease in Childhood"	Abstract H	341	16	0				54	6	0
"Journal of Neurology and Psychopathology"	" I	18	8	1				26	4	9
Reserve Funds—Amounts transferred to—										
Sinking Fund for the redemption of Leasehold Premises		2,433	6	8				2,433	6	8
Amount provided against commitments for Extension of Premises		6,000	0	0				15,000	0	0
Reserve for dilapidations and re-decorations		1,500	0	0				2,000	0	0
Reserve for the Renewal and Replacements of Printing Plant		4,000	0	0				—		
Reserve for Loss on Exchange on Dominion Currencies		1,000	0	0				1,000	0	0
Brokerage incurred in purchase of shares		14	3	1				15	10	6
Depreciation written off—										
	£ s. d.									
Leasehold Premises Tavistock Square, W.C.1	3,000 0 0				3,000 0 0					
" " Scottish House, Edinburgh	300 0 0				300 0 0					
Library	500 0 0				500 0 0					
Furniture and Fittings	899 9 0				941 9 6					
Plant and Type	898 4 3				836 1 1					
		5,597	13	3				5,577	10	7
Balance of Income over Expenditure		1,969	8	10				1,612	2	8
		£160,090	6	4				£166,870	17	8

for the Year ending December 31, 1936

	1935 £	s.	d.	1936 £	s.	d
Subscriptions for year	87,365	18	10	£3,344	18	11
„ for previous year	2,284	9	3	2,278	5	8
„ for former years previously written off	461	18	0	494	14	3
Journal Account, Total Receipts	62,319	6	6	66,057	10	5
Rents Received and Accrued	5,102	10	0	6,407	19	8
Interest on Investments, Deposits, etc.	2,244	6	3	2,746	14	3
Scientific Grants Unused and Returned	—			26	18	5
Refund of Part of the amount paid under guarantee to National Ophthalmic Treatment Board	311	8	6	503	1	8
Sundries..		9	0	10	14	5
	£160,090	6	4	£166,870	17	8

Abstract A

JOURNAL

(Including Sundry

Income and Expenditure Account for

	1935 £ s. d.	1935 £ s. d.	1936 £ s. d.	1936 £ s. d.
EDITORIAL				
Salaries—Editor and Editorial Staff [11]	5,743 4 11		**6,102 16 7**	
Contributions to "Journal"	2,163 0 6		**2,263 14 6**	
Reporting	754 13 11		**666 14 11**	
Fee to Pharmacologist	105 0 0		**105 0 0**	
Fees to Advisers	—		**39 7 6**	
Engraving	256 18 2		**166 11 9**	
Legal Charges	18 9 9		**5 19 6**	
Postages	84 0 0		**87 0 0**	
Travelling, Parliamentary Papers, and Sundries	28 8 0		**31 19 4**	
Compiling Indexes for "Journal" and "Supplement"	149 12 7		**150 13 9**	
Editorial Petty Cash	4 17 11		**6 11 5**	
		9,308 5 9		**9,626 9 3**
MANAGERIAL				
"Journal"—Compositors' and Readers' Wages, Machining, etc. [32]	24,667 5 0		**25,373 2 9**	
" Paper	11,242 18 6		**11,358 15 6**	
"Supplement"—Compositors' and Readers' Wages, Machining, etc.	2,446 14 6		**2,754 19 10**	
" Paper	1,124 5 10		**1,262 1 9**	
Postage for Dispatch of "Journal"	15,000 10 6		**16,132 16 7**	
Address Bands for "Journal"	943 10 0		**989 0 0**	
Repairs to Plant and Printers' Sundries	131 13 11		**107 6 4**	
Proportion of Manager's and Clerks' Salaries	4,697 4 0		**5,075 18 9**	
General Postage	363 1 11		**367 3 1**	
Printings—Proofs, Circulars, etc.	129 11 3		**109 11 9**	
Advertising—Propaganda Booklets	—		**160 7 0**	
Reprints	560 12 3		**651 12 1**	
Special Reports, Pamphlets, etc.	956 1 7		**1,019 7 7**	
Stationery (Ledgers, etc.)	98 4 6		**105 9 10**	
Insurances	33 1 11		**32 18 9**	
Expenditure in connection with changes in format of "Journal"	—		**214 10 11**	
"British Medical Journal" Board of Directors—				
Railway Fares	—		**51 17 5**	
Fees	—		**183 15 0**	
Printings	—		**55 12 0**	
Reporting	—		**2 2 0**	
Sundries	12 2 0		**2 5 0**	
		62,406 17 8		**66,010 13 11**
		£71,715 3 5		**£75,637 3 2**

ACCOUNT

Publications)

the Year ending December 31, 1936

	1935						1936					
	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
Advertisements	53,871	15	10				57,532	8	9			
Sundry Sales—Journals	6,039	12	3				5,997	18	10			
„ Special Reports, Pamphlets, etc.	1,132	6	0				849	5	1			
„ Reprints	619	3	8				798	8	8			
„ Covers, Blocks, etc.	52	1	5				75	9	8			
Sale of Waste	4	17	1				6	13	10			
Discounts on Machining, Paper purchases, etc.	599	10	3				663	10	11			
Royalties on Sales of Publications	—						133	14	8			
				62,319	6	6				65,057	10	5

Comparative table of total number of pages published during period covered by accounts

	In 1935	In 1936
Literary and Epitome	2,848	2,892
Supplement	620	724
Advertisements	3,284	3,500
	6,752	7,116

Balance from Subscriptions for the cost of production and issue of the "Journal"	9,395 16 11	9,579 12 9
	£71,715 3 5	£75,637 3 2

Abstract B

Central Meetings Expenses

	1935 £ s. d.	1935 £ s. d.	1936 £ s. d.	1936 £ s. d.
Annual Representative Meeting—				
Railway Fares	533 17 10		**562 11 5**	
Printings	267 6 11		**355 14 2**	
Sundries	25 17 6		**33 15 6**	
		827 2 3		**952 1 1**
Annual Meeting Expenses		1,481 17 7		**229 2 6**
(The figures for 1935, Melbourne Meeting, include the balance of fares, etc., for Officers and Secretariat)				
Council—				
Railway Fares	846 8 10		**744 12 8**	
Printings	808 14 8		**926 4 8**	
Sundries	21 9 4		**85 4 6**	
		1,676 12 10		**1,756 1 10**
Secretaries' Conference—				
Railway Fares		84 16 5		**119 1 5**
		£4,070 9 1		**£3,056 6 10**
COMMITTEES				
Abortion, Committee re Medical Aspects of—				
Railway Fares	41 8 9		**53 5 6**	
Printings	2 12 3		**6 7 10**	
Sundries	3 0 0		—	
		47 1 0		**59 13 4**
Arrangements Committee—				
Railway Fares	30 14 9		**105 18 8**	
Printings	37 0 1		**19 16 9**	
		67 14 10		**125 15 5**
Central Ethical Committee—				
Railway Fares	40 15 3		**44 13 9**	
Printings	11 18 3		**9 6 8**	
		52 13 6		**54 0 5**
Charities Committee—				
Railway Fares	25 17 6		**28 17 9**	
Printings	7 16 11		**6 0 6**	
		33 14 5		**34 18 3**
Compulsory use of Yellow Lights for Motor Cars, Committee re—				
Railway Fares			**14 9**	
Printings			**7 10**	
		—		**1 2 7**
Consultants and Specialists Committee—				
Railway Fares	93 6 9		**43 2 0**	
Printings	32 14 5		**29 0 10**	
		126 1 2		**72 2 10**
Consulting Pathologists Group Committee—				
Railway Fares	19 2 6		**12 3 9**	
Printings	1 6 11		**6 1 4**	
		20 9 5		**18 5 1**
Dominions Committee—				
Railway Fares	20 19 9		**22 14 6**	
Printings	3 4 1		**16 19 2**	
		24 3 10		**39 13 8**
Emergency Committee—				
Printings		—		**3 10 2**
Enquiry into Office Arrangements Committee—				
Railway Fares			**5 4 6**	
Printings			**1 0**	
		—		**5 5 6**
Finance Committee—				
Railway Fares	22 19 3		**42 11 9**	
Printings	68 14 8		**78 10 6**	
		91 13 11		**121 2 3**
Fractures Committee—				
Printings		4 13 7		—
Health Services Committee—				
Railway Fares			**74 9 0**	
Printings			**3 4 5**	
		—		**77 13 5**
Hospitals Committee—				
Railway Fares	47 2 6		**115 6 0**	
Printings	40 1 11		**61 15 10**	
		87 4 5		**177 1 10**
Indian Medical Service Committee—				
Railway Fares	1 18 9			
Printings	13 11			
		2 12 8		—
Insurance Acts Committee—				
Railway Fares	264 9 6		**404 0 11**	
Printings	20 6 7		**22 4 11**	
		284 16 1		**426 5 10**
Carried forward		£4,913 7 11		**£4,272 17 5**

	1935 £ s. d.	1935 £ s. d.	1936 £ s. d.	1936 £ s. d.
Brought forward		4,913 7 11		4,272 17 5
Journal Committee—				
Railway Fares	87 15 3		60 16 0	
Printings	9 12 0		24 15 6	
		97 7 3		85 11 6
Legal Actions Committee—				
Printings	—			2 1
Medical Education Committee—				
Railway Fares	7 1 9			
Printings	8 3			
		7 10 0		—
Medical Practitioners' and Mental Illness Committee—				
Printings		7 0		—
Medico-Political and Parliamentary Committee—				
Railway Fares	303 1 7		383 7 1	
Printings	52 10 8		63 8 1	
Road Traffic Claims Forms	69 15 4		—	
		425 7 7		446 15 2
Miners' Nystagmus Committee—				
Railway Fares	31 10 9		40 8 0	
Printings	4 12 0		4 10 0	
		36 2 9		44 18 0
National Maternity Service Committee—				
Railway Fares		26 5 3		—
Naval and Military Committee—				
Railway Fares	23 13 3		33 19 0	
Printings	5 16 4		4 4 2	
		29 9 7		38 3 2
Nutrition Committee				
Railway Fares	17 12 1			
Printings	8 15 8			
		26 7 9		—
Office Committee—				
Fees and Railway Fares	94 10 0		95 17 0	
Printings	1 1 2		1 7 0	
		95 11 2		97 4 0
Ophthalmic Committee—				
Railway Fares	54 2 6		57 6 9	
Printings	8 14 4		6 1 2	
Reporting	—		3 17 6	
		62 16 10		67 5 5
Organisation Committee—				
Railway Fares	198 2 5		167 14 5	
"Annual Handbook"	47 16 0		81 5 6	
Articles and By-Laws	—		122 17 6	
Medical Practitioners' Handbook	496 6 0		—	
Non-Members' List	107 2 0		70 6 0	
Printings, etc.	203 8 9		159 1 11	
Posting and Addressing Propaganda Issue of Journal	105 2 6		171 9 4	
Fares of Newly-appointed Secretaries visiting H.Q.	—		25 10 0	
Sundries	13 16 9		15 10 0	
		1,171 14 5		813 14 8
Organisation of the Profession in India, Committee re—				
Railway Fares			1 3 6	
Printings			1 1 8	
		—		2 5 2
Parliamentary Elections Committee—				
Railway Fares	3 9 0			
Printings	7 3			
		3 16 3		—
Physical Education Committee				
Railway Fares	100 11 0		39 18 3	
Printings	46 6 3		18 0 0	
Sundries	2 5 0		—	
		149 2 3		57 18 3
Practitioners of Physical Medicine Group Committee—				
Railway Fares	3 17 9		6 2 3	
Printings	7 2		1 18 6	
		4 4 11		8 0 9
Public Health Committee—				
Railway Fares	161 1 6		134 1 6	
Printings	53 1 6		60 16 8	
		214 3 0		194 18 2
Radiologists Group Committee—				
Railway Fares			2 7 3	
Printings			2 0	
		—		2 9 3
Relation of Alcohol to Road Accidents, Committee re—				
Railway Fares	12 19 0			
Printings	2 0 3			
		14 19 3		—
Carried forward		£7,278 13 2		£6,132 3 0

	1935 £ s. d.	1935 £ s. d.	1936 £ s. d.	1936 £ s. d.
Carried Forward		7,278 13 2		6,132 3 0
Science Committee—				
Railway Fares	43 5 9		**80 13 9**	
Printings	25 19 3		**44 3 8**	
Lectures	115 0 4		**142 1 4**	
		184 5 4		**266 18 9**
Spa Practitioners Committee—				
Railway Fares	15 10 9			
Printings	12 9			
		16 3 6		—
		£7,479 2 0		**£6,399 1 9**

Abstract C

Library Expenses

	1935 £ s. d.	1936 £ s. d.
Salaries—Librarian and Clerical Staff [6]	1,264 19 0	**1,336 17 7**
Subscription to Messrs. H. K. Lewis's Library	220 0 0	**255 0 0**
Postages and Sundries	89 0 10	**80 16 2**
	£1,573 19 10	**£1,672 13 9**

Abstract D

General Association Expenses

	1935 £ s. d.	1936 £ s. d.
Auditors' Fee	315 0 0	**315 0 0**
Bank Charges	39 17 8	**44 1 3**
Income Tax on Dividends and Interest	500 17 6	**627 13 2**
Legal Charges—		
re Opposition to Osteopaths Bill	3,488 16 4	—
General	423 10 6	**303 15 3**
Parliamentary Papers, Directories, Press Cuttings, etc.	237 10 10	**226 19 3**
Petty Cash	243 15 3	**262 16 11**
Porters' Liveries and Boiler Suits	37 8 6	**11 10 11**
Rent of Telephones (G.P.O. and Internal, including Editorial)	269 12 3	**386 19 6**
Repairs to and Maintenance of Typewriters	60 1 0	**58 13 0**
Stamping Subscription Receipt Books	156 15 0	**160 10 8**
Research Scholarships	850 0 0	**837 10 0**
Scientific Grants	150 0 0	—
Prizes for Essays by Final Year Students	80 0 0	—
Sir Charles Hastings Clinical Prize	52 10 0	**52 10 0**
Sir Charles Hastings Lecture	11 4 9	**49 4 0**
Subscription, etc., Association Professionnelle Internationale des Médecins	222 19 0	**221 6 4**
Examiners' and Visitors' Fees	44 2 0	**36 15 0**
Pension—Mrs. J. R. Drever	500 0 0	**500 0 0**
" Dr. Courtenay Lord	500 0 0	**458 6 8**
" Dr. Alfred Cox	720 0 0	**720 0 0**
" Mrs. T. Hennessy	—	**293 6 8**
Grant to Australian Federal Council	—	**797 4 2**
Fees and Expenses re Sanatorium Treatment for Member of Staff	—	**129 1 6**
Indian Tour of Medical Secretary	—	**702 0 0**
Gold Medal of Association	—	**35 0 0**
Grant to Kitchen Sub-Committee	34 4 4	—
Bonus to Retiring Compositors	48 15 0	—
Binding Presentation Set of "British Medical Journal"	50 0 0	—
Sundries	135 12 3	**290 17 11**
	£9,172 12 2	**£7,521 2 2**

Abstract E

Central Premises Expenses

	1935 £ s. d.	1936 £ s. d.
Cleaning Offices	1,015 0 0	**972 14 4**
Coals, Wood, and Oil	921 0 9	**922 0 6**
General Repairs, Upkeep, and Alterations	665 10 2	**1,067 15 11**
Electricity and Gas	549 14 5	**655 6 1**
Insurances	607 4 8	**585 8 9**
Ground Rent	2,500 0 0	**2,500 0 0**
Rates and Taxes	4,877 2 2	**5,121 10 10**
Care and Maintenance of Grounds	7 1 6	**15 18 11**
	£11,142 13 8	**£11,840 15 4**

Abstract F

Central Staff Expenses

	1935 £ s. d.	1935 £ s. d.	1936 £ s. d.	1936 £ s. d.
Financial Secretariat and Clerical Staff [35]	9,230 19 5		9,844 19 3	
Less Proportion of Salaries debited to Journal A/c	4,697 4 0		5,075 18 9	
		4,533 15 5		4,769 0 6
Medical Secretariat and Clerical Staff [36]		11,111 11 6		10,936 9 1
Porters and Janitor [9]		1,395 6 3		1,412 9 2
Premiums of Deferred Annuities for Officials		954 1 4		1,129 9 11
Contributions to Office Staff Superannuation Fund		706 16 0		730 15 9
Travelling and Subsistence Expenses of Officials and Staff at Annual Meeting, etc.		125 19 3		387 18 11
Fidelity Guarantee and Employers' Liability Insurance		65 6 2		65 3 1
		£18,892 15 11		£19,431 6 5

Abstract G

Central Printing, Stationery, and Postage Expenses

	1935 £ s. d.	1936 £ s. d.
General Printing	824 17 4	682 2 3
General Postages :—		
Finance Department	726 3 10	734 6 2
Medical Department	544 19 7	577 19 7
Stationery	884 0 7	949 9 2
	£2,980 1 4	£2,943 17 2

Abstract J

Scottish Committee

Financial Statement for the Year ending December 31, 1936

1936.	£ s. d.	£ s. d.
To Balance in hand		101 13 1
„ Cash from Head Office	2,607 15 0	
Less refunds by N.I.D.T. and Rent received direct	211 2 4	
		2,396 12 8
„ Rents		395 0 0
„ Use of Rooms for Meetings		137 4 0
„ Tenants' proportion of Cleaning, etc., costs		70 1 8
		£3,100 11 5

1936.	£ s. d.	£ s. d.
By Heating, Cleaning, Lighting, etc.		370 14 3
„ Rates and Taxes		240 13 6
„ Feu duty		36 17 5
„ Fares of Members attending—		
Scottish Committee	128 18 2	
I.A.C. Subcommittee	19 3 3	
Branch Secretaries (Anti-Gas)	6 17 9	
Consultants and Specialists Group Committee for Scotland	4 1 3	
		159 0 5
„ Fares of Scottish Medical Secretary, including attendance at A.R.M.		113 8 3
„ Salaries of Scottish Medical Secretary and Staff, including N.H.I. and U. Insurance		1,670 6 9
„ Fire Insurance		6 7 6
„ Printing		117 8 9
„ Postages		26 0 0
„ Telephones and Telegrams		52 4 3
„ Upkeep, Renewals, and Repairs		104 9 0
„ Auditors' Fees		3 3 0
„ Solicitor's Fee		1 6 0
„ Sundry Small Outlays		1 18 5
„ **Balance,** Cash in Hand		196 13 11
		£3,100 11 5

Abstract II

"Archives of Disease in Childhood"

Income and Expenditure Account for the Year ending December 31, 1936

	1935 £	s.	d.	1936 £	s.	d.
Composing and Machining	607	2	6	**415**	**10**	**6**
Paper	82	6	6	**47**	**10**	**0**
Engraving	104	9	0	**112**	**12**	**6**
Machining Index	10	12	0	**6**	**7**	**6**
Reprints	109	9	0	**59**	**12**	**0**
Postages	36	12	10	**17**	**1**	**7**
Proportion of Managerial Salaries	52	0	0	**52**	**0**	**0**
Advertising	26	16	0	**19**	**4**	**0**
Stationery and Sundries	19	11	0	**2**	**19**	**0**
	£1,048	18	10	**£732**	**17**	**1**

	1935 £	s.	d.	1936 £	s.	d.
Subscriptions	518	9	0	**550**	**7**	**4**
Advertisements	53	6	7	**45**	**15**	**5**
Reprints	118	8	2	**67**	**1**	**0**
Cash Sales and Sundries	16	19	1	**15**	**7**	**4**
Deficit transferred to "Income and Expenditure Account"	341	16	0	**54**	**6**	**0**
	£1,048	18	10	**£732**	**17**	**1**

Abstract I

"Journal of Neurology and Psychopathology"

Income and Expenditure Account for the Year ending December 31, 1936

	1935 £	s.	d.	1936 £	s.	d.
Composing, Machining, and Paper (including Index)	307	4	0	**310**	**3**	**0**
Engraving	35	3	3	**38**	**1**	**6**
Reprints	43	9	7	**89**	**17**	**9**
Postages	7	15	11	**10**	**9**	**6**
Proportion of Managerial Salaries	26	0	0	**26**	**0**	**0**
Advertising	7	12	0	**12**	**16**	**0**
Compiling Index	4	4	0	**4**	**4**	**0**
Stationery and Sundries	11	11	6	**2**	**18**	**9**
	£443	0	3	**£494**	**10**	**6**

	1935 £	s.	d.	1936 £	s.	d.
Subscriptions	326	5	8	**326**	**7**	**1**
Advertisements	42	8	7	**41**	**5**	**1**
Reprints	49	15	2	**93**	**12**	**5**
Cash Sales and Sundries	6	2	9	**7**	**1**	**2**
Deficit transferred to "Income and Expenditure Account"	18	8	1	**26**	**4**	**9**
	£433	0	3	**£494**	**10**	**6**

Office Staff Superannuation Fund

For which the Council of the British Medical Association Acts as Trustee

Income and Expenditure Account for the Year ending December 31, 1936

1936	EXPENDITURE	£	s.	d.	£	s.	d.
Dec. 31.	—To Amount returned to Members retiring from Fund				171	8	6
„	Charges incurred in purchase of Stock ..				4	14	0
„	Balance being excess of Income over Expenditure transferred to Balance Sheet ..				2,602	4	0
					£2,778	6	6

1936	INCOME	£	s.	d.	£	s.	d.
Dec. 31.	—By Contributions due from Members	833	10	9			
„	Contributions due from British Medical Association and Medical Insurance Agency	862	18	9			
					1,696	9	6
„	Interest on Investments				864	3	10
„	Refund of Income Tax on Dividends and Interest taxed at source (1935-36) ..				217	13	2
					£2,778	6	6

Dr. **Balance Sheet as at December 31, 1936** *Cr.*

LIABILITIES	£	s.	d.	£	s.	d.
To Capital Account—						
Balance at January 1st, 1936	28,144	14	2			
Add Excess of Income over Expenditure for the year 1936	2,602	4	0			
				30,746	18	2
				£30,746	18	2

ASSETS	£	s.	d.	£	s.	d.
By Investments calculated at cost or under—						
„ £250 Bank of England Stock at 200	500	0	0			
„ £2,500 Commonwealth of Australia 3¼ per cent. R.S. 1956/1961 at cost	2,460	7	6			
„ £1,000 Commonwealth of Australia 5 per cent. R.S. 1945/1975 at cost (98$_{7/8}$)	981	10	0			
„ £6,455 1s. 4d. Consolidated 4 per cent. Stock at cost	5,802	19	0			
„ £1,900 3½ per cent. Conversion Loan at cost..	1,893	16	9			
„ £1,000 India 3 per cent. Stock at 57¾	578	15	0			
„ £4,000 London County Consolidated 4½ per cent. Stock 1945/1985 at cost	3,975	6	10			
„ £500 National Savings Certificates at cost	393	15	0			
„ £2,900 3½ per cent. War Stock 1952 at cost	2,709	7	7			
„ £900 London and North Eastern Railway 3 per cent. Debentures at conversion price	504	0	0			
„ £719 London, Midland, and Scottish Railway 4 per cent. Guaranteed Stock at conversion price	575	8	3			
„ £587 London, Midland, and Scottish Railway 4 per cent. Debentures at conversion price	453	0	0			
„ £1,700 3 per cent. Conversion Loan at cost	1,671	18	9			
„ £3,700 Local Loans 3 per cent. Stock at cost	3,523	15	7			
„ £2,000 London County 2¾ per cent. I.S. 1960/70 at cost	1,914	18	9			
„ £400 New Zealand 3 per cent. Stock 1945 at 64	256	0	0			
„ £1,400 London County Consolidated 3 per cent. Stock at cost ..	1,334	5	0			
„ £300 Grand Trunk Pacific 3 per cent. Bonds 1962 at cost	297	15	0			
				29,826	19	0
Market value of investments at December 31, 1936, was £34,443						
By Cash at Bank				919	19	2
				£30,746	18	2

TRUST FUNDS FOR WHICH THE COUNCIL OF THE BRITISH MEDICAL ASSOCIATION ACTS AS TRUSTEE

Stewart Fund

(*Holding £579 London, Midland, and Scottish Railway 4% Debenture Stock "D" a/c.*)

1936		£	s.	d.	1936		£	s.	d.
	To Balance brought forward at January 1st, 1936	15	1	3		By Balance Cash in hand	32	17	4
	„ Interest on Investment and Deposits	17	16	1					
		£32	17	4			£32	17	4

Francis Fowke Bequest

(*Holding £600 3½% Conversion Loan.*)

1936		£	s.	d.	1936		£	s.	d.
	To Balance brought forward at January 1st, 1936	6	18	0		By Balance, Cash in hand	23	0	11
	„ Interest on Investment	16	2	11					
		£23	0	11			£23	0	11

Middlemore Fund

(*Holding £666 London and North-Eastern Railway 3% Debenture Stock.*)

1936		£	s.	d.	1936		£	s.	d.
	To Balance brought forward at January 1st, 1936	50	7	2		By Prize awarded	50	0	0
	„ Interest on Investment	15	7	2		„ Balance Cash in hand	15	14	4
		£65	14	4			£65	14	4

Katherine Bishop Harman Prize Fund

(*Holding £1,000 New South Wales 5% Stock, 1945-65.*)

1936		£	s.	d.	1936		£	s.	d.
	To Balance brought forward at January 1st, 1936	57	15	0		By Prizes awarded	75	0	0
	„ Interest on Investment	38	2	6		„ Balance Cash in hand	20	17	6
		£95	17	6			£95	17	6

Sir Charles Hastings Fund

For which the Council of the British Medical Association acts as Nominal Trustee, the Chairman of the Representative Body, Chairman of Council, and the Medical Secretary acting as Executive Trustees

(a) GENERAL FUND

1936	£ s. d.	£ s. d.
To Balance brought forward from 1935—		
Investments bequeathed and calculated at middle market price December 31, 1925—		
£200 Greek Government 7 per cent. Refugee Loan of 1924 at 90½	181 0 0	
£50 Chinese Imperial Government 4 per cent. Bond 1898 at 80½ ..	40 5 0	
25 Phoenix Assurance Co. £1 Shares at 13¼	331 5 0	
20 Central Mining and Investment Corporation £8 Shares at 15..	300 0 0	
33 Swedish Match Co. "B" Shares (100 Swedish crowns each at cost)	371 3 4	
Investments purchased, calculated at cost price—		
£900 Corporation of London 4½ per cent. Stock 1940-85 at 101¼..	911 5 0	
£90 5s. 3d. Consolidated 4 per cent. Stock at 99¼	89 9 6	
Cash at Bank—Current and Deposit Accounts	161 18 3	
		2,386 6 1
,, *Subscriptions and Donations		532 3 2
,, Interest on Investments and Deposits		73 16 9
Refund of Loans		160 0 0
		£3,152 6 0

1936	£ s. d.	£ s. d.
By Loans—		
Case "A"	50 0 0	
Case "B"	50 0 0	
Case "C"	25 0 0	
Case "D"	13 13 0	
Case "E"	52 10 0	
Case "F"	100 0 0	
		291 3 0
,, Income Tax on Untaxed Interest and Dividends		7 8 6
,, **Balance December 31, 1936**—		
Investments bequeathed and calculated at middle market price December 31, 1925—		
£200 Greek Government 7 per cent. Refugee Loan of 1924 at 90½	181 0 0	
£50 Chinese Imperial Government 4 per cent. Bond, 1898, at 80½	40 5 0	
25 Phoenix Assurance Co. £1 Shares at 13¼	331 5 0	
20 Central Mining and Investment Corporation £8 Shares at 15..	300 0 0	
33 Swedish Match Co. "B" Shares (100 Swedish crowns each at cost)	371 3 4	
Investments purchased, calculated at cost price—		
£900 Corporation of London 4½ per cent. Stock, 1940-85, at 101¼	911 5 0	
£90 5s. 3d. Consolidated 4 per cent. Stock at 99¼	89 9 6	
Cash at Bank—Current and Deposit Accounts	629 6 8	
		2,853 14 6
Market value of investments at December 31, 1936, was £2,204 0 5		£3,152 6 0

* This sum includes a grant of £450 from the Medical Insurance Agency

(b) CHRISTINE MURRELL BEQUEST FUND

1936	£ s. d.	£ s. d.
To Balance brought forward from 1935—		
Investments purchased calculated at cost price—		
£1,038 17s. 2d. Local Loans 3 per cent. at 96	997 6 1	
Cash at Bank, Current and Deposit Accounts	697 3 0	
		1,694 9 1
,, Interest on Investments and Deposits		27 2 11
		£1,721 12 0

1936	£ s. d.	£ s. d.
By Loan Case "G"		250 0 0
,, *Balance December* 31, 1936—		
Investments purchased calculated at cost price—		
£1,038 17s. 2d. Local Loans 3 per cent. at 96	997 6 1	
Cash at Bank, Current and Deposit Accounts	474 5 11	
		1,471 12 0
Market value of investments at December 31, 1936, was £1,003 15 9		£1,721 12 0

Central Emergency Fund

For which the Medico-Political and Parliamentary Committee of the British Medical Association acts as Trustee

1936	£ s. d.	£ s. d.
To Balance January 1, 1936, *brought forward*—		
500 National Savings Certificates (3rd Series) (with accrued interest)	512 10 0	
£1,000 4 per cent. Consolidated Stock (at cost)	848 16 0	
£400 2½ per cent. Consolidated Stock (at cost)	305 7 6	
	1,666 13 6	
Less overdraft at Bank	56 16 2	
		1,609 17 4
,, Proceeds on sale of 100 National Savings Certificates (3rd series) (with accrued interest)	106 5 0	
Less book value	102 10 0	
		3 15 0
,, Subscriptions and Donations	17 16 0	
,, Dividends and Interest	38 8 10	
		56 4 10
,, Interest accrued on National Savings Certificates		15 0 0
		£1,684 17 2

1936	£ s. d.	£ s. d.
By Income Tax on untaxed Interest		4 6
,, Payments made in connection with industrial dispute		105 15 0
,, *Balance at December* 31, 1936, *represented by*—		
400 National Savings Certificates (3rd series) (with accrued interest) £425 0 0		
£1,000 4 per cent. Consolidated Stock (at cost) .. 848 16 0		
£400 2½ per cent. Consolidated Stock (at cost) .. 305 7 6		
	1,579 3 6	
Less overdraft at Bank	5 10	
		1,578 17 8
Market value of investments at December 31, 1936, was £1,893 0 0		£1,684 17 2

British Medical Association Charities Trust Fund

Statements of Amounts Collected and Distributed for Twelve Months ending December 31, 1936

	1935 £ s. d.	1936 £ s. d.
To Subscriptions and Donations collected—		
(*a*) For distribution at the discretion of B.M.A. Charities Committee ..	2,540 15 0	2,473 10 8
(*b*) Royal Medical Benevolent Fund	2,059 17 6	2,148 19 4
(*c*) Royal Medical Foundation of Epsom College	1,074 7 6	1,038 13 11
(*d*) Royal Medical Benevolent Fund Society of Ireland	31 18 0	36 0 9
	£5,706 18 0	£5,697 4 8

	1935 £ s. d.	£ s. d.	1936 £ s. d.
By Amounts distributed to—			
(*a*) Royal Medical Benevolent Fund.			
(1) Allocated from B.M.A. Charities Fund		1,573 15 4	
(2) Earmarked for Fund	3,506 12 0	2,148 19 4	3,722 14 8
(*b*) Royal Medical Foundation of Epsom College.			
(1) Allocated from B.M.A. Charities for General Fund		715 15 4	
(2) Allocated from B.M.A. Charities for Sherman Bigg Fund		78 0 0	
(3) Earmarked for Fund	1,872 14 10	1,038 13 11	1,832 9 3
(*c*) Royal Medical Benevolent Fund Guild. Allocated from B.M.A. Charities Fund	150 0 0		106 0 0
(*d*) Royal Medical Benevolent Fund Society of Ireland. Earmarked for Fund	31 18 0		36 0 9
(*e*) Sir Charles Hastings Fund. Allocated from B.M.A. Charities Fund	145 13 2		—
	£5,706 18 0		£5,697 4 8

Medical Representation in Parliament Fund

For which the Council of the British Medical Association acts as Trustee

1936	£ s. d.
To Balance at January 1, 1936, *brought forward*	711 2 10
,, Subscriptions and Donations	9 17 0
,, Interest on Bank Deposit Account	3 11 2
	£724 11 0

1936	£ s. d.
By Income Tax on untaxed interest	18 0
,, *Balance at December* 31, 1936— Cash at Bank—Current and Deposits Accounts	723 13 0
	£724 11 0

AUDITORS' REPORT TO MEMBERS OF THE ASSOCIATION

Having examined the Balance Sheet, dated December 31, 1936, *and Accounts with the Books and Vouchers of the Association, except as regards the Scottish Committee Account, and having received all the information and explanations we have required, we report that the Balance Sheet is, in our opinion, properly drawn up so as to exhibit a true and correct view of the state of the affairs of the Association according to the best of our information and the explanations given to us and as shown by the Books of the Association.*

We have inspected the Lease of the New Building and the Disposition in favour of the Association of the premises 6 *and* 7, *Drumsheugh Gardens, Edinburgh, and have verified the investments of the Association on General Account, on account of the Trust Funds and of the Office Staff Superannuation Fund.*

We further report that we have examined the Accounts, with the Books and Vouchers, of the Medical Funds for whom the Association receives remittances, and found them correct.

N. BISHOP HARMAN, F.R.C.S.,
Treasurer.

E. KAYE LE FLEMING,
Chairman of Council.

L. FERRIS-SCOTT, F.C.A.,
Financial Secretary and Business Manager.

PRICE, WATERHOUSE & CO.,
3, *Frederick's Place, Old Jewry, E.C.* 2.

March 11, 1937.

British Medical Association

OFFICES, BRITISH MEDICAL ASSOCIATION HOUSE, TAVISTOCK SQUARE, W.C.1

Departments

SUBSCRIPTIONS AND ADVERTISEMENTS (Financial Secretary and Business Manager. Telegrams: Articulate Westcent, London).
MEDICAL SECRETARY (Telegrams: Medisecra Westcent, London.
EDITOR, BRITISH MEDICAL JOURNAL (Telegrams: Aitiology Westcent, London).
Telephone numbers of British Medical Association and British Medical Journal, Euston 2111 (internal exchange, five lines).
B.M.A. SCOTTISH MEDICAL SECRETARY: 7, Drumsheugh Gardens, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 24361 Edinburgh.)
Irish Free State Medical Union (I.M.A. and B.M.A.): 18, Kildare Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 62550 Dublin.)

Diary of Central Meetings

APRIL

30 Fri. Organization Committee, Grants Subcommittee, 2.30 p.m.

MAY

4 Tues. Central Ethical Committee, 2 p.m.
5 Wed. Hospitals Committee, 12 noon.
Medico-Political Committee, 2 p.m.
7 Fri. Journal Board, 10.15 a.m.
Building Committee, 3 p.m.
14 Fri. Journal Committee, Epitome Subcommittee, 11.30 a.m.
Journal Committee 2 p.m.
Public Health Committee, 2 p.m.
18 Tues. Organization Committee 2 p.m.
20 Thurs. Committee *re* Organization of the Medical Profession in India, 2.15 p.m.
21 Fri. Naval and Military Committee, 2.30 p.m.
24 Mon. Dominions Committee, 2.15 p.m.
27 Thurs. Subcommittee *re* Case of Marshall *versus* Lindsey County Council, 2.30 p.m.

JUNE

11 Fri. Journal Committee, Foods and Drugs (Advertisements) Subcommittee, 11.30 a.m.

Group of Psychological Medicine of the Association

Notice is hereby given of the formation by the Council of a Group of Psychological Medicine, which shall be composed of all those members of the Association who are engaged predominantly in the practice of psychological medicine. Every member of the Association coming within this definition is *ipso facto* a member of the Group. Members of the Association who claim to conform to this definition are requested to notify the Medical Secretary, B.M.A. House, Tavistock Square, W.C.1, not later than May 22, 1937. The first general meeting of the Group will be held at a date to be subsequently announced in the *Supplement*.

G. C. ANDERSON,
Medical Secretary.

April 28.

Scholarships and Grants in Aid of Scientific Research

Scholarships

The Council of the British Medical Association is prepared to receive applications for Research Scholarships as follows: an Ernest Hart Memorial Scholarship, of the value of £200 per annum, a Walter Dixon Scholarship, of the value of £200 per annum, and three Research Scholarships, each of the value of £150 per annum. These Scholarships are given to candidates whom the Science Committee of the Association recommends as qualified to undertake research in any subject (including State medicine) relating to the causation, prevention, or treatment of disease. Preference will be given, other things being equal, to members of the medical profession. Each Scholarship is tenable for one year, commencing on October 1, 1937. A Scholar may be reappointed for not more than two additional terms. A Scholar is not necessarily required to devote the whole of his or her time to the work of research, but may hold a junior appointment at a university, medical school, or hospital, provided the duties of such appointment do not interfere with his or her work as a Scholar.

Grants

The Council of the British Medical Association is also prepared to receive applications for Grants for the assistance of research into the causation, treatment, or prevention of disease. Preference will be given, other things being equal, to members of the medical profession and to applicants who propose as subjects of investigation problems directly related to practical medicine.

Conditions of Award: Applications

Applications for Scholarships and Grants must be made not later than Saturday, May 8, 1937, on the prescribed form, a copy of which will be supplied on application to the Medical Secretary of the Association, B.M.A. House, Tavistock Square, London, W.C.1. Applicants are required to furnish the names of three referees who are competent to speak as to their capacity for the research contemplated.

Branch and Division Meetings to be Held

BORDER COUNTIES BRANCH.—At Cumberland Infirmary, Carlisle, Thursday, May 6, 3.15 p.m. Dr. Robert Gow McInnes: "Mental Health."

EDINBURGH BRANCH: SOUTH-EASTERN COUNTIES DIVISION.—At Royal Hotel, Galashiels, Wednesday, May 5. Annual meeting. Election of officers, consideration of Annual Report of Council, etc.

GLASGOW AND WEST OF SCOTLAND BRANCH: LANARKSHIRE DIVISION.—At St. Enoch Station Hotel, Glasgow, Wednesday, May 5, 3.30 p.m. Dr. John D. Comrie (Edinburgh): "History of Glasgow Medicine."

HERTFORDSHIRE BRANCH: BARNET DIVISION.—At Welland House, New Barnet, Tuesday, May 4, 8.30 p.m. Dr. A. F. Hurst: "The Origin and Treatment of Diseases of the Alimentary Tract."

HERTFORDSHIRE BRANCH: EAST HERTFORDSHIRE DIVISION.—Thursday, May 6, 2 p.m. Golf competition.

LANCASHIRE AND CHESHIRE BRANCH: BURY DIVISION.—At Jersy Hall, Bury, Friday, May 14. Coronation dinner and dance.

LANCASHIRE AND CHESHIRE BRANCH: ROCHDALE DIVISION.—At Rochdale Infirmary, Friday, May 7, 8.30 p.m. Annual meeting. Election of officers, etc. Dr. T. Milnes Bride: "Some Common Pitfalls in Diseases of the Eye."

METROPOLITAN COUNTIES BRANCH: CITY DIVISION.—At Metropolitan Hospital, Kingsland Road, E., Tuesday, May 4, 9.30 p.m. Mr. W. Girling Ball: "Chronic Infections of the Urinary Tract."

METROPOLITAN COUNTIES BRANCH: HAMPSTEAD DIVISION.—At Hampstead General Hospital, Thursday, May 6, 8.30 p.m. Consideration of Annual Report of Council and election of representatives and deputy representatives.

METROPOLITAN COUNTIES BRANCH: NORTH MIDDLESEX DIVISION.—Wednesday, May 5. Annual meeting.

NORTHERN IRELAND BRANCH: BELFAST DIVISION.—Thursday, May 6, 4.15 p.m. Annual general meeting.

NYASALAND BRANCH.—At King Edward VII Memorial Hall, Blantyre, Saturday, June 5, 10 a.m. Scientific meeting.

SOUTH WALES AND MONMOUTHSHIRE BRANCH: SWANSEA DIVISION.—Thursday, May 6. Consideration of Annual Report and Election of Representative.

SOUTHERN BRANCH: PORTSMOUTH DIVISION.—At Queen's Hotel, Southsea, Thursday, May 6, 9.30 p.m. Annual general meeting. Preceded by supper at 9 p.m.

SURREY BRANCH: CROYDON DIVISION.—At Croydon General Hospital, Tuesday, May 4, 8.30 p.m. Annual general meeting.

SURREY BRANCH: KINGSTON-ON-THAMES DIVISION.—At Kingston and District Hospital, Tuesday, May 4, 8.30 p.m. Annual general meeting. Election of officers. Consideration of Annual Report of Council.

SUSSEX BRANCH: BRIGHTON DIVISION.—Joint meeting with the Brighton, Hove and District Teachers' Association, at the Grand Hotel, Brighton, Tuesday, May 4, 8.30 p.m. Dr. Norman Maple: "Chaos to Cosmos." Preceded by supper at 7.30 p.m.

YORKSHIRE BRANCH: WAKEFIELD, PONTEFRACT AND CASTLEFORD DIVISION.—At Stratford Arms Hotel, Wakefield, Thursday, May 6. Annual general meeting. Preceded by dinner at 7.45 p.m.

Meetings of Branches and Divisions

ABERDEEN BRANCH: CITY OF ABERDEEN DIVISION

At a meeting of the City of Aberdeen Division, held at Aberdeen on February 18, with Dr. J. A. INNES in the chair, a British Medical Association Lecture on "The Toxaemias of Late Pregnancy" was given by Professor F. J. BROWNE. Over eighty members and guests were present. Professor Browne classified the toxaemias: (1) pre-eclamptic toxaemia and eclampsia; (2) nephritic toxaemias; (3) essential hypertension; and (4) accidental haemorrhage. Discussing pre-eclamptic toxaemia, the lecturer stressed the importance of taking the blood pressure, pointing out how a rise was frequently the first sign of this condition. In mild cases there should be rest, but not necessarily in bed, and a low protein diet with plenty of vegetables, fruit, salad, and one pint of milk daily. In severer cases with a blood pressure of 150/100 or over, with or without oedema or albuminuria, rest in bed was essential; if there was oedema a salt-free diet and fluid restriction were called for. Moreover, the blood pressure and quantity of urine should be recorded daily. If the condition did not become normal in three weeks, pregnancy should be terminated to prevent chronic nephritis. If, however, the foetus was already viable (thirty-fifth week) pregnancy should be terminated within a week. In the pre-eclamptic state when the signs were more marked complete starvation was called for; and glucose water by the mouth, brisk purgation, and venesection to 10 to 20 ounces should be resorted to. If there was no rapid improvement in a day or two the pregnancy must be terminated, in urgent cases by Caesarean section, in less urgent cases by bag or bougies.

As regards the nephritic toxaemias it was usually wise to terminate the pregnancy—exceptions to this rule were rare. The best management in these few cases was complete rest in bed till the child was viable and then Caesarean section. It had to be noted that the foetus often died *in utero* from placental infarction in spite of every care. In essential hypertension there was usually no need to terminate the pregnancy. An attempt should be made to keep the blood pressure under 180 systolic and 110 diastolic. The risk of accidental haemorrhage and of foetal death had to be kept in mind. Termination of the pregnancy was therefore often indicated once the foetus was viable. A discussion, taken part in by Professor D. BAIRD, Mr. G. S. DAVIDSON, Dr. G. MITCHELL (Insch), and Dr. J. CRAIG, followed. On the motion of the CHAIRMAN, Professor Browne was accorded a very cordial vote of thanks for his lecture.

Problems of Urinary Infection

A further meeting of the City of Aberdeen Division was held at Aberdeen on March 18, with Mr. A. FOWLER in the chair, when Professor J. R. LEARMONTH gave an address on "Certain Problems of Urinary Infection in Practice." The lecturer enumerated the various routes by which it was possible for organisms to reach the urinary tract. While extension of infection within the tract from kidney to bladder followed the urinary tide, the so-called ascending type of infection was less easy to explain. Histological investigations failed to produce evidence that ascending invasion occurred by way of the peri-ureteral lymphatics. One hypothesis suggested that as a result of the irritation of vesical infection there was an upset in the physiological mechanism controlling both the passage of urine along the ureter and its entrance into the bladder. According to this view the uretero-vesical orifice might be opened during the act of micturition and so allow the entrance of infected urine. This was actively propelled to the renal pelves by peristaltic movements of the ureter of necessity in the opposite direction to the normal. It was pointed out that the majority of bacterial invaders of the urinary tract were derived from a source within the body. Of the haematogenous group cocci were derived from cutaneous and less often from nasopharyngeal lesions, while bacilli of the colon group were from the large bowel. In bacillary infections patients might be divided into three groups: those with definite intestinal lesions, those with constipation, and those without history or signs of intestinal trouble. In an endeavour to find an explanation of the frequency of urinary infections in practice, and especially those of the relapsing and chronic types, there were two accessory factors—trauma and obstruction to the urinary flow. Though at first each might operate alone, in the majority of cases ultimately they are present together.

A classification of the types of cases met with in general practice and which should be useful in everyday work was suggested:

A. Urinary infection which did not give rise to clinical features referable to the urinary tract.

B. Conditions which clinically aroused suspicion that infection of the urinary tract was present, but evidence of this in the urine was lacking.

C. Urinary infections in which both the history and the examination of the urine provided the diagnosis.

The importance of obtaining the history, of a thorough physical examination, of examination of the urine, and of radiography and visualization of the urinary tract was emphasized.

In conclusion, the lecturer said that every urological condition, and particularly every infective condition, should be considered primarily in terms of renal function. To-day there were at our disposal accurate methods of ascertaining the data upon which we could form an opinion, and we should do our patients less than justice if we failed to utilize these methods.

A discussion followed, in which Professors D. BAIRD and CRUICKSHANK and Dr. R. BRUCE took part. On the motion of Mr. A. MITCHELL, Professor Learmonth was accorded a very cordial vote of thanks for his address.

BIRMINGHAM BRANCH: NUNEATON AND TAMWORTH DIVISION

At a meeting of the Nuneaton and Tamworth Division, held at Atherstone on March 17, the following officers were elected:

Chairman, Dr. J. V. L. Grant. *Joint Honorary Secretaries*, Drs. T. H. Forrest and P. G. Horsburgh. *Representative in Representative Body*, Dr. W. Lowson.

Plans were then considered for a course of instruction in anti-gas measures, and the acting honorary secretary, Dr. P. A. V. Barford, was instructed to make the necessary arrangements.

BIRMINGHAM BRANCH: WARWICK AND LEAMINGTON AND RUGBY DIVISIONS

At a joint meeting of the Warwick and Leamington and Rugby Divisions, held at Leamington Spa on April 8, Dr. C. H. Gregory of Rugby was elected representative of the two Divisions in the Representative Body, and Dr. A. S. Murray of Stratford-on-Avon was elected deputy representative.

CALCUTTA BRANCH

At the annual general meeting of the Calcutta Branch, held at Calcutta on February 12, with the president, Lieut.-Colonel E. O'G. KIRWAN, I.M.S., in the chair, the reports for 1936 of the Branch Council, the honorary treasurer, and the honorary secretary were read and adopted. The following officers were elected:

President, Rai Dr. U. N. Roy Chaudhuri Bahadur. *Vice-presidents*, Dr. M. N. De and Lieut.-Colonel E. H. Vere-Hodge, I.M.S. *Honorary Secretary*, Dr. J. P. Chaudhuri. *Honorary Treasurer*, Dr. K. Banerjee.

Dr. S. Sinha was appointed convenor of the clinical meetings of the Branch. A resolution was passed recording the appreciation of the members of the Branch of the visit of the Medical Secretary, Dr. G. C. Anderson, and the secretary was instructed to forward a letter to Dr. Anderson informing him of the resolution.

DORSET AND WEST HANTS BRANCH: BOURNEMOUTH DIVISION

At a meeting of the Bournemouth Division, held at Boscombe Hospital on March 24, with Dr. J. C. A. NORMAN in the chair, Dr. C. F. PEDLEY read a paper on "Some Experiences in the Conduct of Maternity and Child Welfare Clinics and Medical Inspection of School Children."

Discussing the school medical service, Dr. Pedley said that in Bournemouth there were about 10,000 children to be examined. All these were seen first when they entered school, then between the ages of 8 and 12, and again when they left school. Parents had the right to object to their children being examined by a school medical officer; they were also invited to be present at the examination if they so wished, and very often they availed themselves of this opportunity. A record card was kept for each child examined, on which all defects were noted. The school medical officer kept the general practitioner constantly in mind, nothing being done to interfere with any treatment the latter was carrying out. Dr. Pedley did not attach great importance to the weight of a child, but rather to the physical development. Mouth breathing, he thought, should always be looked upon as pathological, and meant that there were diseased tonsils and adenoids which required operative treatment. The chest was carefully examined at these school inspections, and he was of the opinion

that tuberculosis was rare in young children, but that chronic bronchial catarrh was common, especially in those who had had whooping-cough in early infancy. This chronic bronchial catarrh, if neglected, sometimes led to bronchiectasis.

An interesting discussion followed, in which the CHAIRMAN, DRS. RICHARDSON, LITHERLAND, DIXON GREEN, ROOKE, CARTER, ASTEN, and LUKER took part, and a hearty vote of thanks was accorded Dr. Pedley for his interesting and instructive paper.

EAST YORKSHIRE BRANCH

Members of the East Yorkshire Branch, in association with the Hull Medical Society and the Yorkshire Council of the British Empire Cancer Campaign, attended a meeting at Hull on April 2 to hear Dr. A. T. TODD deliver a lecture on "The Medical Treatment of Cancer, with Special Reference to Inoperables." He described the use of selenium and lead combined into colloidal lead selenide, which was tried only on inoperable cases; good results were obtained, 10 per cent. of the cases remaining cured. Experiments were also conducted combining irradiation or deep *x*-ray therapy with the colloidal treatment. The lecturer advocated the general rather than the local use of cancer therapy. His method was to inject intravenously the colloid—one dose each week—and two days after each injection irradiation was given. Dr. Todd described methods for the relief of pain. It was essential that the nutrition of the patient be maintained and that fear be dispelled. He gave statistics of the results obtained. He recommended six months' treatment with selenide and irradiation for operable cases after excision of the growth.

DRS. R. GRIEVE, CORBETT, CRIPPS, A. M. MILLAR, and EVE took part in the discussion which followed, and a vote of thanks was proposed by Mr. J. F. GILL and seconded by Dr. D. MACRAE TOD.

On April 7 a party of members of the Branch and their ladies, numbering fifty, toured the factories of Messrs. T. J. Smith and Nephew, Ltd., Hull. The tour lasted one and a half hours, several processes being fully demonstrated and explained. Later tea was provided in the social hall. Dr. S. F. FOURACRE proposed a vote of thanks to the management for the very interesting afternoon, and Dr. EVE seconded. Mr. H. N. Smith briefly responded.

EDINBURGH BRANCH: LOTHIANS DIVISION

A meeting of the Lothians Division was held at B.M.A. House, Edinburgh, on April 14, when there was a discussion on the Scottish Maternity Services Bill. A small committee was appointed to meet the medical officers of health of Mid-Lothian and East Lothian to consider what steps should be taken in those counties. It was unanimously agreed that the fee for services to be rendered under the Bill should not be less than £3 3s.

EGYPTIAN BRANCH

The Egyptian Branch held a very successful meeting on March 30, when Professor F. H. SMIRK gave an account of some recent work done in the pharmacology department of the Egyptian University on a blood pressure raising reflex. A discussion followed. Dr. ROLAND WILSON, who presided, congratulated the speaker on his work and his interesting exposition of it.

FIFE BRANCH

The first clinical meeting for 1937 of the Fife Branch was held at Kirkcaldy Station Hotel on March 11, when the B.M.A. fracture film was shown to a representative audience. Dr. G. M. FYFE, president of the Branch, presided, and an address on "The Modern Treatment of Fractures," with a commentary on the film, was delivered by Mr. D. STEWART MIDDLETON (Edinburgh). The lecturer sketched the development of treatment from fixation by wooded splints (often unsatisfactory), preceded by reduction more or less accurate and followed by early passive movement, the results usually being prolonged incapacity with atrophy of the affected limb. The reaction to this form of treatment was the method introduced by Lucas Champonnière, consisting in early massage and passive movements, less attention being paid to accurate reduction and fixation. Except in cases of malunion, the lecturer showed how early passive movements tended to defeat their object by straining the injured parts and thus preventing the normal increase of natural mobility, while active movement governed by the patient's sensations gave much better results. The modern treatment of fractures required three essentials: (1) accurate reduction; (2) complete immobilization of the fracture; (3) active use of the limb. Complete immobilization of the fracture could only be secured by an accurately fitting plaster splint, and this method, as introduced by Böhler, was now the one employed. The importance of early active movements or exercises was emphasized, the work of the masseur being no longer massage and passive movements but rather the direction of exercises and the encouragement of active movements.

Many members took part in the discussion which followed, and a very hearty vote of thanks was accorded Mr. Stewart Middleton for his instructive and interesting address.

GIBRALTAR BRANCH

A meeting of the Gibraltar Branch was held on January 21 with Colonel A. N. FRASER, D.S.O., in the chair. Dr. A. MC. K. FLEMING, *M.C.*, opened a discussion on "Tuberculosis Control in Gibraltar." He described the organization for the control of tuberculosis as it existed in England, and explained the modifications which would be necessary to make the scheme adaptable to conditions in Gibraltar. The lecturer stated that a sanatorium and dispensary would be built in connexion with the proposed scheme and would be known as the King George V Memorial Hospital. He appealed for the co-operation of the medical practitioners in carrying out the campaign against the disease. A lively discussion followed in which the PRESIDENT, Dr. GILL, Dr. DEALE, Dr. DURANTE, Dr. GIRALDI, and Colonel DIXON took part, and the meeting terminated with a hearty vote of thanks to Dr. Fleming for his address.

On April 6, the Branch held a clinical meeting at the Colonial Hospital, when, in the absence of the president, the vice-president, Dr. A. A. RUSSO, occupied the chair. Several Naval medical officers were present as guests. After tea had been served, the members and guests proceeded to the wards where a series of demonstrations were given by the staff. Dr. J. LOCHHEAD showed a case of pyaemia, and a series of radiographs of a case which had been successfully operated on of coloptosis due to tethering down of the colon by bands. Dr. J. E. DEALE demonstrated: (1) A series of radiographs of severely comminuted fractures in which the degree of comminution was out of all proportion to the severity of the causative violence. (2) Fracture of the lumbar spine successfully treated by hyperextension. (3) Fracture-dislocation of the second cervical vertebra caused by a sudden movement of the head while combing the hair. (4) Radiographs of a case of bilateral renal calculi with abscess formation. Dr. GILCHRIST showed a radiograph of ossified nodules of unknown aetiology in the ligamentum patellae, and a patient with a haematoma of the testicle. Dr. FLEMING demonstrated: (1) radiographs of pulmonary tuberculosis treated by artificial pneumothorax; (2) a case of headaches associated with an extraordinarily high lymphocyte count in the cerebro-spinal fluid; and (3) a case of amyotrophic lateral sclerosis.

A very successful meeting terminated with a unanimous vote of thanks to the lecturers for their interesting demonstrations.

KENYA BRANCH: MOMBASA DIVISION

At a special meeting of the Mombasa Division, held at the Native Civil Hospital, Mombasa, on February 24, with Dr. S. D. KARVE in the chair, Dr. A. R. PATERSON gave an address on "Yellow Fever," in which he urged members of the Division to do their utmost to educate the public on this subject. At the conclusion of the meeting a vote of thanks was accorded Dr. Paterson for his lecture.

LANCASHIRE AND CHESHIRE BRANCH: PRESTON DIVISION

A joint meeting of the Preston Division and the Preston Medico-Ethical Society was held at Preston Royal Infirmary on April 13, when through the courtesy of Messrs. T. J. Smith and Nephew, Ltd., a film entitled "Cellona Film on Fractures" was shown. The film demonstrated the use of cellona chiefly in combination with local anaesthesia for fixation of fractures of the upper and lower extremities. There was a large audience and an interesting discussion took place.

LANCASHIRE AND CHESHIRE BRANCH: ROCHDALE DIVISION

At a meeting of the Rochdale Division, held at Rochdale Infirmary on March 12, Dr. L. Kilroe was elected representative in the Representative Body, and Drs. J. F. Knox and A. M. McMaster were elected deputy representatives.

Dr. J. F. WILKINSON (Manchester) delivered a lecture on "The Diagnosis and Treatment of Some Common Anaemias." Dr. Wilkinson said that he would confine his remarks to the consideration of primary microcytic anaemia and pernicious anaemia. In the examination of a case the clinical history

was of great importance. Next a complete blood count was essential, and a fractional gastric analysis should also be done. Having established a diagnosis of microcytic anaemia, iron should be administered in adequate doses; about 90 grains of ferri et. ammon. cit. or 18 grains of ferrous chloride represented the average daily dose required. The treatment should be controlled by frequent blood counts, and when the case was considered to have reached the stage of cure, re-examination at intervals of three or six months was advisable. Pernicious anaemia generally required rest in bed in the early stages of treatment, with a full normal diet. Stomach extract or liver extract was essential, care being taken in the case of stomach extract not to administer it in hot fluids, as these destroyed the active principles. Symptomatic treatment also required attention. Complications which might be present—for instance, hypothyroidism—should be treated independently of the anaemia. Dr. Wilkinson illustrated his remarks by lantern slides and diagrams. The lecture was followed with great interest, and many members took part in the discussion and questions after the lecture. On the proposal of Dr. W. H. BATEMAN, seconded by Dr. H. N. CROSSLEY, Dr. Wilkinson was cordially thanked for his lucid and practical address.

At a joint meeting of the Bury, Oldham, and Rochdale Divisions, held at Rochdale on April 9, with Dr. J. CURRIE, chairman of the Oldham Division, in the chair, Mr. GEOFFREY JEFFERSON (Manchester) delivered a British Medical Association Lecture entitled "An Account of Eight Cases of Operation for Removal of a Frontal Lobe of the Brain, with Six Recoveries." Mr. Jefferson had originally intended to lecture on the surgical treatment of intractable pain, but he explained that he had been moved to change his subject because he had spent the early part of his life in Rochdale, and he wished to make the first communication of this paper to a Rochdale audience. The paper, which will appear in due course in the columns of the *Journal*, records a most important stage in the history of brain surgery. It represents the first account of any considerable number of successful operations of this nature. Mr. Jefferson's audience appreciated the privilege of being the first to hear this communication. Drs. C. ROBERTSON WILSON and MCMASTER expressed the thanks of the meeting to Mr. Jefferson for his lecture.

LINCOLNSHIRE BRANCH: LINCOLN DIVISION

At a meeting of the Lincoln Division, held at Lincoln on March 11, Dr. R. D. LAWRENCE read a paper on "The Practitioner and Diabetic Emergencies."

Dr. Lawrence said that the majority of diabetics were today sent to hospital, where they were put on a diet and given insulin. After they came out, however, they often became too independent, and in consequence the practitioner was faced with many difficulties. Referring to patients under treatment with insulin, Dr. Lawrence stressed the fact that sugar in the urine was not serious, but that acidosis was. Starvation and vomiting produced the dangerous condition of ketosis. Another cause of trouble was muscular exercise after insulin, as the effort involved used up sugar. Any illness tended to make diabetes worse, and necessitated an extra dose of insulin, but if vomiting was marked it was as well to cut down the insulin by half. Dr. Lawrence next dealt with the differential diagnosis of hyper- and hypoglycaemia; when in doubt it was best to give sugar.

In the treatment of true coma repeated insulin with ample sugar was necessary, and many cases would need large quantities of saline, four to eight pints by the continuous intravenous drip method.

Questions were asked by Drs. H. C. BARLOW, LEVIS, G. C. WELLS-COLE, A. C. FRASER, MAIDEN, and SHARRARD.

In replying Dr. LAWRENCE gave an outline of treatment with zinc protamine insulin.

A hearty vote of thanks was accorded Dr. Lawrence for his address, on the motion of Dr. BARLOW, seconded by Dr. F. ALCOCK.

METROPOLITAN COUNTIES BRANCH: GREENWICH AND DEPTFORD DIVISION

The Greenwich and Deptford Division held a dinner and dance at Chiesman's Restaurant on March 11. This was the first event of the kind, and there was a most gratifying response, no fewer than 121 people sitting down to dinner. Dr. W. B. SILAS, the chairman of the Division, presided, with Sir Walter and Lady Langdon-Brown as the principal guests. The toast of "The Division" was proposed by Dr. HAROLD PRITCHARD, and the CHAIRMAN replied. The toast of "The Guests" was proposed by Dr. W. SMITH, Sir WALTER LANGDON-BROWN replying. After dinner there was dancing, which continued until 1 a.m.

NORTH OF ENGLAND BRANCH: MORPETH AND BLYTH DIVISIONS

A joint meeting of the Morpeth and Blyth Divisions was held at Ashington on March 19, when Mr. J. K. STANGER (Newcastle-upon-Tyne) delivered an interesting lecture on "Back Injuries." Mr. Stanger confined himself to injuries af the muscles and to fractures of the spine. His address was illustrated by lantern slides showing the method of treatment of a fractured spine, and by radiographs of various cases. On the motion of Dr. A. A. BONAR, seconded by Dr. M. BRUCE, a hearty vote of thanks was accorded to Mr. Stanger for his address.

The following officers of the Morpeth Division were then elected:

Chairman, Dr. T. S. Blaiklock. *Vice-Chairman*, Dr. Murdo Maclean. *Honorary Secretary*, Dr. Dugald Revie. *Charities Secretary*, Dr. W. Stephenson. *Golf Secretary*, Dr. Bonar.

NORTHERN IRELAND BRANCH: BELFAST DIVISION

A meeting of the Belfast Division was held in the Whitla Medical Institute, Belfast, on April 15, with Dr. S. E. A. ACHESON in the chair. The Division had the pleasure of welcoming Dr. G. C. Anderson, Medical Secretary of the Association, who gave an interesting and stimulating address entitled "The British Medical Association and Future Medical Practice." Dr. Anderson began by outlining the objects and activities of the B.M.A., touching briefly on its contributions to medical education and scientific advance, to the ethical aspect of practice, and to the maintenance of the interests of medical practitioners in public services. The Association had contributed to the promotion of national health and its scheme for a General Medical Service advocated an extension of the principles of national health insurance to everyone who conformed to certain standards of income, and to their dependants, together with specialist benefits. As it was unlikely that such an extension could take place for some years, the B.M.A. was leading the profession in forming its own Public Medical Service, on lines comparable with the national health insurance schemes. It was, however, entirely controlled by medical men. Passing to the hospital problem Dr. Anderson spoke of the change which had taken place in the hospital system. Formerly a service for the very poor, it was now resorted to by almost all classes of the community, and all but the poorest were now asked to contribute. The consulting staff, however, still gave their services free, and this was from every point of view a mistake. In country areas especially, the absence of remuneration restricted the supply of consultants below what was necessary. Referring to the maternity services Dr. Anderson reminded the meeting how the reduction in maternal mortality, hoped for after the introduction of ante-natal clinics, had not taken place. This was because there was no continuity of care. Advance would only result when the general practitioner formed an integral part of any maternity service. A cordial vote of thanks was accorded Dr. Anderson, on the motion of Professor R. J. JOHNSTONE, seconded by Dr. JOHN ARMSTRONG.

SOUTH-WESTERN BRANCH: PLYMOUTH DIVISION

A meeting of the Plymouth Division was held at the Central Police Station, Plymouth, on March 17, when Dr. S. NOY SCOTT was in the chair. The large number of members present were divided into parties, each party being under the care of one of the staff of the C.I.D., who demonstrated various phases in the detection of crime. Members were very much impressed by the high standard of efficiency attained by the C.I.D. of Plymouth, and could have continued to ask questions until a much later hour. At the conclusion of the demonstration members were entertained most generously to a buffet supper, the Chief Constable acting as host, ably seconded by Superintendent W. T. Hutchings and his colleagues. This hospitality was a complete surprise to the Division and was thoroughly enjoyed. A vote of thanks to the Chief Constable and Superintendent Hutchings was proposed very eloquently by Dr. E. WORDLEY, who said that as compared with the life of police the life of the average doctor was one of peace and joy. The vote of thanks was seconded by the honorary secretary, Mr. C. F. MAYNE, and carried with acclamation. The Chief Constable, in reply, said that he and his colleagues were very happy indeed to welcome the members of the

British Medical Association, and emphasised that anything which brought his Department into closer collaboration with the medical profession was much to be encouraged.

STIRLING BRANCH

A clinical meeting of the Stirling Branch was held at Stirling Infirmary on March 31, when Dr. P. F. MACFARLAN described the injuries to the internal semilunar cartilage of the knee-joint, and illustrated the method of treatment with two cases. Two cases of tuberculosis of the spine in children treated by an Albee operation with excellent results were also shown. Dr. W. B. G. ANGUS described and illustrated a case of advanced tabes dorsalis with Charcot's joints, multiple fractures, and other parasyphilitic lesions. Dr. EVA CAIRNS illustrated the value of prontosil treatment in three cases of puerperal fever, and showed how *x*-ray examination and the Aschheim-Zondek test for pregnancy had been employed in the diagnosis of an obscure case of early pregnancy complicated by dermoid cyst. Dr. G. L. REID described how ganglionectomy could be used for the relief of pathological conditions, and illustrated his remarks with a case of bilateral removal of the stellate ganglion for Raynaud's disease, and a case of lumbar sympathectomy for the relief of pain in advanced rheumatoid arthritis of the hip-joint.

After a vote of thanks to those who had demonstrated cases, the meeting proceeded to the election of Dr. C. Melville as representative in the Representative Body.

SUDAN BRANCH

At a meeting of the Sudan Branch, held at the Kitchener School of Medicine on February 8, the president, Dr. F. S. MAYNE, read a paper entitled "A Review of Methods Used for Extension in Fractures of the Lower Limb." Dr. Mayne described the six principal methods as strapping, Sinclair's glue, Hamilton-Russel parallelogram of forces, Steineman's pins, Pearson's ice-tong calliper, and Kirschner wires and stirrups. The advantages and disadvantages of the various methods were discussed, and a number of slides were shown. Reference was also made to the Smith-Petersen nail for fractured neck of the femur, and slides were shown illustrating how it can be inserted by the use of Kirschner wire guides and portable *x*-ray apparatus. A vote of thanks was accorded to Dr. Mayne for his address, and the meeting adjourned.

SURREY BRANCH: KINGSTON-ON-THAMES DIVISION

At a meeting of the Kingston-on-Thames Division, held at the Kingston and District Hospital on March 9, with Dr. A. S. HOLLINS in the chair, Dr. R. D. LAWRENCE gave an address on "Diabetic Emergencies and the General Practitioner." The lecturer started by explaining in detail the reasons for the fluctuations in the blood sugar which controlled the onset of diabetic and hypoglycaemic coma. The differential diagnosis between the two states, he said, might cause great difficulties, but it should be remembered that insulin coma usually came on suddenly, frequently at noon or midnight, when the blood sugar reached its lowest curves, and was dramatically cured by sugar; and that diabetic coma had a gradual onset, occurred at the times when the blood sugar was highest, and did not react to sugar. Where there was doubt the urine could be withdrawn by catheter: it might contain sugar in both conditions, but a further specimen in 10 minutes would be sugar-free in hyperglycaemia and loaded in diabetic coma. The test administration of two lumps of sugar would not do material harm in cases of hyperglycaemia, but would cause rapid improvement in early cases of insulin coma. In answer to questions Dr. Lawrence stated that there was no satisfactory oral substitute for insulin. Zinc protamine insulin was a hopeful new form which required only one injection a day, but was not as yet really out of the experimental stage. The meeting closed with a vote of thanks proposed by the CHAIRMAN.

SURREY BRANCH: RICHMOND DIVISION

At a meeting of the Richmond Division, held at Richmond Royal Hospital on March 12, with Lieut.-Col. E. L. GOWLLAND, D.S.O., in the chair, Dr. ROBERT FORBES read a paper on "Medico-Legal Problems on General Practice." Dr. Forbes began by urging practitioners to be accurate in making out certificates, and told of the risks of not having an *x*-ray examination of every injury due to a fall or blow. He referred to the duties of medical practitioners in cases of illegal operations and abortion. A long and interesting discussion followed in which most members present took part. On the motion of the CHAIRMAN a hearty vote of thanks was accorded Dr. Forbes for his address.

VACANCIES

ABERDEEN ROYAL INFIRMARY.—(1) Surgical Registrar. Salary £200 p.a. (2) Second Hon. Ophthalmic S.

ANNIE MCCALL MATERNITY HOSPITAL, Jeffreys Road, S.W.—M.O. (female). Salary £100 p.a.

ASHFORD: GROSVENOR SANATORIUM.—R.H.P. (male). Salary £100 p.a.

BARNSLEY: BECKETT HOSPITAL AND DISPENSARY.—C.O. (male). Salary £250 p.a.

BATH AND WESSEX CHILDREN'S ORTHOPAEDIC HOSPITAL.—H.S. Salary £120 p.a.

BECKENHAM BOROUGH.—Assistant M.O.H. and School M.O.

BEDFORD COUNTY HOSPITAL.—Second H.S. (male, unmarried). Salary £150 p.a.

BELFAST: SAMARITAN HOSPITAL FOR WOMEN.—Hon. Junior Assistant Visiting S.

BENENDEN: NATIONAL SANATORIUM. — Medical Superintendent. Salary £600-£50-£750 p.a.

BIRMINGHAM CITY.—A.R.M.O. (male, unmarried) for the Tuberculosis Section. Salary £400-£25-£450 p.a.

BIRMINGHAM: QUEEN'S HOSPITAL.—R.S.O. Salary £150 p.a.

BOLINGBROKE HOSPITAL, Wandsworth Common, S.W.—(1) C.O. (2) H.S. Males, unmarried. Salaries £120 p.a. each.

BOURNEMOUTH: ROYAL NATIONAL SANATORIUM.—A.R.M.O. (male, unmarried). Salary £200 p.a.

BRIGHTON: ROYAL ALEXANDRA HOSPITAL FOR SICK CHILDREN.—H.S. (male). Salary £120 p.a.

BRIGHTON: ROYAL SUSSEX COUNTY HOSPITAL.—H.S. (male). Salary £150 p.a.

BRISTOL ROYAL INFIRMARY AND BRISTOL GENERAL HOSPITAL.—Two Hon Radiologists.

BURY INFIRMARY.—(1) Third H.S. (2) C.O. Males. Salaries £150 p.a. each.

BURY ST. EDMUNDS: WEST SUFFOLK GENERAL HOSPITAL.—H.S. Salary £180 p.a.

CARDIFF: WELSH NATIONAL SCHOOL OF MEDICINE.—Temporary full-time Junior Assistant in the Medical Unit. Salary £250 p.a.

CENTRAL LONDON THROAT, NOSE AND EAR HOSPITAL, Gray's Inn Road, W.C.—(1) Third R.H.S. (male). Salary £75 p.a. (2) Second Assistant and (3) Third Assistant for the Out-patient Department.

CHILDREN'S HOSPITAL, Hampstead, N.W.—R.M.O. Salary £150 p.a.

COLCHESTER: ESSEX COUNTY HOSPITAL.—H.P. (male) Salary £150 p.a.

CONNAUGHT HOSPITAL, Walthamstow, E.—C.O. (male). Salary £100 p.a.

COVENTRY AND WARWICKSHIRE HOSPITAL.—R.C.O. Salary £125 p.a.

CROYDON COUNTY BOROUGH.—Assistant M.O.H. and Assistant School M.O. (male). Salary £500-£25-£700 p.a.

DARLINGTON MEMORIAL HOSPITAL.—H.S. (male). Salary £150 p.a.

DORCHESTER: DORSET COUNTY HOSPITAL.—H.S. (male, unmarried). Salary £150 p.a.

DUDLEY: GUEST HOSPITAL.—Second H.S. (male). Salary £120 p.a.

EAST HAM MEMORIAL HOSPITAL, Shrewsbury Road, E.—H.S. to the Special Departments and C.O. (male). Salary £120 p.a.

GREAT BARR PARK COLONY.—J.A.R.M.O. (male). Salary £275 p.a.

HAMPSTEAD GENERAL AND NORTH-WEST LONDON HOSPITAL, Haverstock Hill, N.W.—(1) Casualty M.O. and (2) Casualty S.O. for the Out-patient Department, Bayham Street. Females, unmarried. Salaries £100 p.a. each.

HOSPITAL FOR TROPICAL DISEASES, Gordon Street, W.C.—(1) Pathologist. Salary £750 p.a. (2) Hon Assistant P.

HOVE GENERAL HOSPITAL.—(1) Senior R.M.O. (2) J.R.M.O. Males. Salaries £150 p.a. and £120 p.a. respectively.

HULL ROYAL INFIRMARY.—Second C.O. (male). Salary £150 p.a.

HULL: VICTORIA HOSPITAL FOR SICK CHILDREN.—R.H.P. (female). Salary £120.

ILFORD: KING GEORGE HOSPITAL.—(1) Hon. Chief Clinical Assistant to the Orthopaedic and Fracture Department. (2) R.S.O. Salary £250 p.a. (3) Medical Registrar. Salary £150 p.a. (4) Two H.S.'s. Salaries £100 p.a. each. Males.

KETTERING AND DISTRICT GENERAL HOSPITAL.—(1) R.M.O. (2) Second R.M.O. (male). Salaries £160 p.a. and £140 p.a. respectively.

LEEDS: GENERAL INFIRMARY.—(1) Hon. P. (2) Resident Anaesthetic Officer. Salary £149 p.a. (3) Junior Resident Anaesthetic Officer. Salary £100 p.a. (4) Radio-Surgical H.S. Salary £100 p.a. (5) R.M.O. (male). Salary £200 p.a.

LEICESTER: CITY MENTAL HOSPITAL, Humberstone.—Locumtenents A.M.O. (male). Salary £10 10s. per week.

LONDON COUNTY COUNCIL.—(1) A.M.O.'s for mental services. Salaries £470-£25-£570 each. (2) A.M.O.'s (Grade II) to (*a*) Archway Hospital, Highgate, N., (*b*) Mile End Hospital, (*c*) St. Andrew's Hospital, Bow, E., (*d*) St. Luke's Hospital, Sydney Street, S.W. Salaries £250 p.a. each. Unmarried. (*a*), (*b*), (*c*), and (*d*) are male appointments only. (3) Temporary District M.O. for Area X, District H (Woolwich). Provisional salary £250.

LONDON JEWISH HOSPITAL, Stepney Green, E.—(1) R.M.O. and H.P. (2) H.S. (3) C.O. Males. Salaries £150 p.a., £100 p.a., and £100 p.a. respectively.

LONDON UNIVERSITY.—University Chair of Bacteriology tenable at University College Hospital Medical School. Salary £1,000 p.a.

LUTON BOROUGH.—M.O.H. and School M.O. Salary £1,000 p.a.

MAIDSTONE: WEST KENT GENERAL HOSPITAL.—H.S. (male). Salary £175 p.a.

MANCHESTER CITY EDUCATION COMMITTEE.—Part-time Psychiatrist for Child Guidance Work. Salary £500 p.a.

MANCHESTER ROYAL INFIRMARY.—Assistant Surgical Dental Officer (non-resident). Salary £35 p.a.

MARKET DRAYTON: CHESHIRE JOINT SANATORIUM.—Resident Locumtenent (male). Salary £6 6s. per week.

MIDDLESBROUGH: NORTH RIDING INFIRMARY.—C.O. (male, unmarried). Salary £150 p.a.

MIDDLESEX COUNTY COUNCIL.—J.R.A.M.O. for Hillingdon County Mental Hospital, Uxbridge. Salary £250 p.a.

MIDDLESEX HOSPITAL, W.—(1) J.M.O. (male) for the Radiotherapy Department. Salary £300 p.a. (2) Whole-time Assistant (male) for the Physical Medicine Department. Salary £300.

NEWCASTLE THROAT, NOSE, AND EAR HOSPITAL.—H.S. Salary £125 p.a.

NORTHAMPTONSHIRE COUNTY COUNCIL.—Temporary Assistant County M.O. (male). Salary £500 p.a.

NORWICH: NORFOLK AND NORWICH HOSPITAL.—R.S.O. Salary £250 p.a.

NOTTINGHAM: GENERAL HOSPITAL.—(1) H.S. to the Ear, Nose and Throat Department. (2) R.C.O. (male). Salaries £150 p.a. each.

OLDHAM COUNTY BOROUGH.—R.A.M.O. (unmarried) for the Municipal Hospital. Salary £200 p.a.

OXFORD EYE HOSPITAL.—H.S. to the Ophthalmic Department. Salary £150 p.a

PLAISTOW MATERNITY HOSPITAL.—(1) R.H.S. Salary £75 p.a. (2) Consulting Paediatrician. Honorarium £20 and a fee of £2 2s. per lecture.

PLYMOUTH: PRINCE OF WALES'S HOSPITAL, Greenbank Road.—H.S. Salary £120 p.a.

PRESTON COUNTY BOROUGH.—Medical Superintendent (male) to Sharoe Green Hospital. Salary £850-£1,062 10s. p.a.

PRESTON: COUNTY MENTAL HOSPITAL, Whittingham.—R.J.A.M.O. Salary £500-£25-£600 p.a.

PRINCESS LOUISE KENSINGTON HOSPITAL FOR CHILDREN, St. Quintin Avenue, W.—(1) H.S. (male). Salary £120-£150 p.a. (2) Hon. Ophthalmic S.

RADIUM INSTITUTE, Riding House Street, W.—R.M.O. (male, unmarried). Salary £250 p.a.

READING: ROYAL BERKSHIRE HOSPITAL.—(1) C.O. (2) H.S. to the Special Departments. Males. Salaries £150 p.a. each.

ROYAL CANCER HOSPITAL (FREE), Fulham Road, S.W.—(1) Non-resident H.S. to the Radium Department. (2) H.S. Salaries £200 p.a. and £100 p.a. respectively.

ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—Assistant P.

ROYAL NORTHERN HOSPITAL, Holloway, N.—(1) H.P. (2) H.S. Salaries £70 p.a. each.

ROYAL WATERLOO HOSPITAL FOR CHILDREN AND WOMEN, Waterloo Road, S.E.—R.C.O. (male). Salary £150 p.a.

RUNWELL HOSPITAL FOR NERVOUS AND MENTAL DISORDERS.—H.P. Salary £150 p.a.

ST. BARTHOLOMEW'S HOSPITAL, E.C.—Assistant Aural S.

ST. PANCRAS METROPOLITAN BOROUGH.—A.M.O. for Maternity and Child Welfare. Fee £1 11s. 6d. per session.

SALFORD CITY.—Part-time Assistant Maternity and Child Welfare M.O. Salary £250 p.a.

SALISBURY: GENERAL INFIRMARY.—R.M.O. (male). Salary £250 p.a.

SALVATION ARMY: MOTHERS' HOSPITAL, Lower Clapton Road, E.—J.R.M.O. (female). Salary £80 p.a.

SHREWSBURY: ROYAL SALOP INFIRMARY.—R.H.S. (male, unmarried). Salary £160 p.a.

SIMLA: MEDICAL COUNCIL OF INDIA.—Secretary. Salary Rs. 1,200-75-1,500 per mensem.

SOUTHAMPTON: ROYAL SOUTH HANTS AND SOUTHAMPTON HOSPITAL. (1) Senior H.S. Salary £200 p.a. (2) H.P. (3) H.S. (4) Resident Anaesthetist and H.S. to the Ear, Nose, and Throat Department. (5) C.O. Salaries £150 p.a. each. Males, unmarried.

STIRLING DISTRICT MENTAL HOSPITAL, Larbert.—Third A.M.O. (female). Salary £250 p.a.

STOCKTON-ON-TEES: DURHAM COUNTY MENTAL HOSPITAL.—Locumtenent A.M.O. Salary £1 1s. per day.

STOKE-ON-TRENT: BURSLEM, HAYWOOD, AND TUNSTALL WAR MEMORIAL HOSPITAL.—R.H.S. Salary £175 p.a.

STROUD GENERAL HOSPITAL.—R.M.O. Salary £160 p.a.

SURREY COUNTY COUNCIL.—Whole-time Resident Medical Superintendent (male) for Botleys Park Colony, near Chertsey. Salary £1,000-£50-£1,375 p.a.

SWANSEA GENERAL AND EYE HOSPITAL.—C.O. (male, unmarried). Salary £150-£175 p.a.

SWINDON AND NORTH WILTS VICTORIA HOSPITAL.—(1) H.P. (2) H.S. Males. Salaries £150 p.a. and £125 p.a. respectively.

TUNBRIDGE WELLS: KENT AND SUSSEX HOSPITAL.—H.S. (male) to the Ear, Nose, and Throat Department. Salary £150 p.a.

WALLASEY: VICTORIA CENTRAL HOSPITAL.—J.H.S. (male). Salary £150 p.a.

WEST SUFFOLK COUNTY COUNCIL.—Assistant County M.O. and Assistant School M.O. Salary £500-£25-£700 p.a.

WHITEHAVEN AND WEST CUMBERLAND HOSPITAL.—H.S. (female). Salary £150 p.a.

WOLVERHAMPTON COUNTY BOROUGH.—R.A.M.O. (male, unmarried) for New Cross Hospital. Salary £200 p.a.

WOLVERHAMPTON: ROYAL HOSPITAL.—H.S.'s (unmarried). Salaries £100 p.a each.

WOOLWICH AND DISTRICT WAR MEMORIAL HOSPITAL, Shooters Hill Hill, S.E.—(1) Surgical Registrar. Honorarium £100 p.a. (2) Three Hon. Anaesthetists.

WORTHING HOSPITAL.—H.S. (male). Salary £130 p.a.

CERTIFYING FACTORY SURGEONS.—The following vacant appointments are announced: Pewsey (Wiltshire); Redcar (Yorkshire, North Riding). Applications to the Chief Inspector of Factories, Home Office, Whitehall, S.W.1, by May 11.

To ensure notice in this column advertisements must be received not later than the first post on Tuesday mornings.

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 49, 50, 51, 52, 53, 54 55, 59, and 60 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 56 and 57.

APPOINTMENTS

KERR, A. K., M.R.C.S., L.R.C.P., Admiralty Surgeon and Agent for St. Ives.

ODLUM, Doris M., M.R.C.S., L.R.C.P., D.P.M., Honorary Psychiatrist to Psychiatric Department, Elizabeth Garrett Anderson Hospital; Honorary Senior Psychiatrist to Department for Nervous Disorders, Royal Victoria and West Hants Hospital, Bournemouth; co-opted member of Mental Hospitals Committee, London County Council.

LONDON COUNTY COUNCIL.—The following appointments are announced at the hospitals and institutions indicated in parentheses. *Medical Superintendents:* William Gunn, M.B., B.S., D.P.H. (North-Western); J. McN. Milloy, F.R.C.S. (Archway); H. O. West, M.D., F.R.C.P., D.P.H. (Queen Mary's, Carshalton). *Divisional Medical Officer:* R. G. Henderson, M.D., D.P.H. (Central Administrative Staff). *Deputy Medical Superintendent, Grade I:* J. P. Aiken, M.B., B.Ch. (Dulwich). *Deputy Medical Superintendents, Grade II:* J. C. Evans, M.R.C.P. (Bethnal Green); I. Price, F.R.C.S. (St. Andrew's). *Senior Assistant Medical Officers, Grade I:* D. Wilkie, M.D., F.R.C.S. (St. Pancras); R. A. V. Lewys-Lloyd, M.B., B.S., D.P.H. (St. Nicholas). *Senior Assistant Medical Officers, Grade II:* A. Wilkie, M.B., Ch.B. (Heatherwood); R. A. Hill, F.R.C.S. (St. Charles'); R. G. Thomas, F.R.C.S. (St. George-in-the-East); A. F. R. Dewar, M.D. (St. Stephen's); Elizabeth M. Moore, M.B., B.Ch. (Mile End); *Assistant Medical Officers, Grade I:* J. B. Arthur, M.B., Ch.B., and T. F. R. Griffin, F.R.C.S. (Bethnal Green); A. K. Boyle, M.B., Ch.B. (St. Peter's); T. A. Fraser, M.D. (Mile End); G. Melton, M.D. (Lewisham); O. A. Savage, M.R.C.S., L.R.C.P. (Grove); J. C. Hogarth, M.B., Ch.B. (Eastern); R. W. Nichol, M.R.C.S., L.R.C.P. (St. Charles'); J. W. Osborne, M.D. (St. Mary Abbots); G. Maizels, M.B., Ch.B. (Dulwich); F. R. Leonard, F.R.C.S. (St. Alfege's); C. Hotson, F.R.C.S. (Lambeth); D. J. Bradley, M.B., B.Ch., and Elizabeth B. Kay, M.B., Ch.B. (Queen Mary's, Carshalton); Margaret F. Coveney, M.B., Ch.B. (White Oak). *Assistant Medical Officers, Grade II:* D. C. Clark, M.B., B.S., and E. J. Blair, M.D. (St. Mary Islington); Mary E. Nevin, M.B., B.Ch. (White Oak); Elspeth W. Smellie, B.M., B.Ch. (Queen Mary's, Carshalton); Kathleen M. N. Vickers, L.R.C.P. (Norwood Children's); E. A. E. Palmer, M.B., B.Ch. (St. Andrew's); Evelyn E. Mitchell, M.B., Ch.B., and Katharine C. Rogers, M.R.C.S., L.R.C.P. (St. Giles); Mary H. Mayeur, M.D. (St. James); H. Baker, M.B., Ch.B., and T. M. Smith, M.B., Ch.B. (Bethnal Green); P. G. Dowling, M.B., B.S., and P. A. Byrne, M.B., Ch.B. (Lambeth); A. L. W. Bell, M.R.C.S., L.R.C.P. (Queen Mary's, Sidcup); G. Rogers, M.R.C.S., L.R.C.P. (St. Peter's). *Temporary Visiting Medical Officer (Part-time):* F. R. Martin, M.D., D.P.M. (Sutton Training Centre).

CERTIFYING FACTORY SURGEONS.—F. E. Higgins, M.R.C.S., L.R.C.P., for the Sudbury District (Suffolk); O. Pitt, M.R.C.S., L.R.C.P., for the Swinton District (Lancashire).

BIRTHS, MARRIAGES, AND DEATHS

The charge for inserting announcements of Births, Marriages, and Deaths is 9s., which sum should be forwarded with the notice not later than the first post on Tuesday morning, in order to ensure insertion in the current issue.

BIRTH

REED.—On April 10, at Batu Gajah, F.M.S., to Penelope, wife of Dr. J. G. Reed, a son.

MARRIAGE

WHITEHEAD—CHAPMAN.—On April 8, 1937, at St. Paul's Church, Mill Hill, James Edward, son of the late John Kay Whitehead of Royton, Lancs, and Mrs. Whitehead, to Marjorie Beatrix, younger daughter of Charles W. Chapman, M.D., M.R.C.P., and Mrs. Chapman of Highwood Coombe, Mill Hill, N.W.7.

DEATH

PHILIP.—On April 23, at 45, Charlotte Square, Edinburgh, Elizabeth, wife of Sir Robert Philip, M.D., F.R.C.P. (Please, no flowers.)